



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION I
475 ALLENDALE ROAD
KING OF PRUSSIA, PENNSYLVANIA 19406-1415

September 16, 2011

Mr. Michael J. Pacilio
Senior Vice President, Exelon Generation Company, LLC
President and Chief Nuclear Officer, Exelon Nuclear
4300 Winfield Rd.
Warrenville, IL 60555

SUBJECT: PEACH BOTTOM ATOMIC POWER STATION, UNITS 2 AND 3 – NRC
PROBLEM IDENTIFICATION AND RESOLUTION INSPECTION REPORT
05000277/2011010 AND 05000278/2011010

Dear Mr. Pacilio:

On August 12, 2011, the U. S. Nuclear Regulatory Commission (NRC) completed an inspection at your Peach Bottom Atomic Power Station, Units 2 and 3 (Peach Bottom). The enclosed report documents the inspection results discussed with Mr. Thomas Dougherty, Peach Bottom Site Vice President, and other members of your staff.

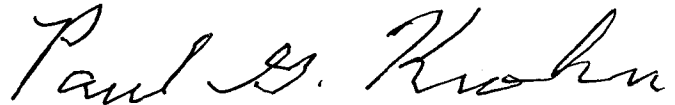
This inspection examined activities conducted under your license as they relate to identification and resolution of problems and compliance with the Commission's rules and regulations and conditions of your license. Within these areas, the inspection involved examination of selected procedures and representative records, observations of activities, and interviews with personnel.

Based on the samples selected for review, the inspectors concluded that Exelon was generally effective in identifying, evaluating, and resolving problems. Exelon personnel identified problems and entered them into the corrective action program at a low threshold. Exelon personnel prioritized and evaluated issues commensurate with the safety significance of the problems and corrective actions were generally implemented in a timely manner.

This report documents one NRC-identified finding of very low safety significance (Green). The inspectors determined that this finding also involved a violation of NRC requirements. However, because of the very low safety significance and because it was entered into your corrective action program, the NRC is treating this finding as a non-cited violation (NCV), consistent with Section 2.3.2 of the NRC Enforcement Policy. If you contest this NCV, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001, with copies to the Regional Administrator, Region I; the Director, Office of Enforcement, United States Nuclear Regulatory Commission, Washington, DC 20555-0001; and the NRC Resident Inspector at Peach Bottom. In addition, if you disagree with the cross-cutting aspect assigned to any finding in this report, you should provide a response, within 30 days of the date of this inspection report, with the basis for your disagreement, to the Regional Administrator, Region I, and the NRC Resident Inspector at Peach Bottom.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter, its enclosure, and your response (if any) will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of the NRC's document system (ADAMS). ADAMS is accessible from the NRC website at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

A handwritten signature in black ink, reading "Paul G. Krohn". The signature is written in a cursive style with a large, stylized "P" and "K".

Paul G. Krohn, Chief
Projects Branch 4
Division of Reactor Projects

Docket Nos.: 50-277, 50-278
License Nos.: DPR-44, DPR-56

Enclosure: Inspection Report 05000277/2011010 and 05000278/2011010
w/Attachment: Supplemental Information

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In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter, its enclosure, and your response (if any) will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of the NRC's document system (ADAMS). ADAMS is accessible from the NRC website at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

/RA/

Paul G. Krohn, Chief
Projects Branch 4
Division of Reactor Projects

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U.S. NUCLEAR REGULATORY COMMISSION**REGION I**

Docket Nos.: 50-277, 50-278

License Nos.: DPR-44, DPR-56

Report Nos.: 05000277/2011010 and 05000278/2011010

Licensee: Exelon Generation Company, LLC (Exelon)

Facility: Peach Bottom Atomic Power Station, Units 2 and 3

Location: Delta, PA

Dates: July 25, 2011 through August 12, 2011

Team Leader: Brice Bickett, Senior Project Engineer

Inspectors: Adam Ziedonis, Peach Bottom Resident Inspector
Sherlyn Ibarrola, Project Engineer
Eric Miller, Project Engineer

Approved by: Paul Krohn, Chief
Projects Branch 4
Division of Reactor Projects

Enclosure

SUMMARY OF FINDINGS

Inspection Report 05000277/2011010 and 05000278/2011010; 07/25/2011 – 08/12/2011; Peach Bottom Units 2 and 3; Biennial Baseline Inspection of Problem Identification and Resolution. The inspectors identified one finding in the area of effectiveness of corrective actions.

This NRC team inspection was performed by three regional inspectors and one resident inspector. The inspectors identified one finding of very low safety significance (Green) during this inspection and classified this finding as a non-cited violation (NCV). The significance of most findings is indicated by their color (Green, White, Yellow, Red) using NRC Inspection Manual Chapter (IMC) 0609, "Significance Determination Process" (SDP). Findings for which the SDP does not apply may be Green or assigned a severity level after NRC management review. Cross-cutting aspects associated with findings are determined using IMC 0310, "Components Within the Cross-Cutting Areas." The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG-1649, "Reactor Oversight Process," Revision 4, dated December 2006.

Problem Identification and Resolution

The inspectors concluded that Exelon was generally effective in identifying, evaluating, and resolving problems. Exelon personnel identified problems, entered them into the corrective action program at a low threshold, and prioritized issues commensurate with their safety significance. In most cases, Exelon personnel appropriately screened issues for operability and reportability, and performed causal analyses that appropriately considered extent of condition, generic issues, and previous occurrences. The inspectors also determined that Exelon personnel typically implemented corrective actions to address the problems identified in the corrective action program in a timely manner. However, the inspectors identified one violation of NRC requirements in the area of effectiveness of corrective actions regarding safety relief valve setpoint drift in excess of TS requirements.

The inspectors concluded that, in general, Exelon personnel adequately identified, reviewed, and applied relevant industry operating experience to Peach Bottom operations. In addition, based on those items selected for review, the inspectors determined that Exelon's self-assessments and audits were thorough.

Based on the interviews the inspectors conducted over the course of the inspection, observations of plant activities, and reviews of individual corrective action program and employee concerns program issues, the inspectors did not identify indications that site personnel were unwilling to raise safety issues nor did they identify conditions that could have had a negative impact on the site's safety conscious work environment.

Cornerstone: Mitigating Systems

- Green. The inspectors identified a finding of very low safety significance (Green) involving a NCV of 10 CFR 50, Appendix B, Criterion XVI, "Corrective Action," because Exelon staff did not implement timely corrective action associated with safety relief valve (SRV)/safety valve (SV) lift setpoint drift in excess of Technical Specification (TS) 3.4.3, "Safety Relief Valves and Safety Valves" requirements. Specifically, Exelon staff did not implement timely or adequate actions to correct SRV lift setpoint drift that, on four occasions since 2004, has exceeded TS acceptance criteria and resulted in repeat TS violations. The station entered

this issue into their corrective action program (CAP) as issue report (IR) 1250472 to evaluate the corrective actions needed to address this issue including evaluation of the proposed revision to the Peach Bottom licensing basis through a TS amendment.

The inspectors determined that the finding was more than minor because it was associated with the equipment performance attribute of the Mitigating Systems cornerstone and affected the cornerstone objective of ensuring the capability and reliability of systems that respond to initiating events to prevent undesirable consequences (i.e., core damage). Specifically, SRVs continue to experience reliability challenges regarding SRV/SV lift setpoint drift and the station remains vulnerable to future TS compliance issues. The inspectors evaluated the significance of this finding using IMC 0609.04, "Phase 1 – Initial Screening and Characterization of Findings." The inspectors determined that this finding was of very low safety significance (Green) because the finding was not a design or qualification deficiency, did not represent a loss of safety system function, and did not screen as potentially risk-significant due to external initiating events. The inspectors' review did not identify a loss of SRV/SV safety function with regard to SRVs/SVs being able to lift within the necessary pressure range to maintain margin to design pressure and stress limits. The finding has a cross-cutting aspect in the area of problem identification and resolution, corrective action program, because Exelon personnel did not implement timely corrective actions to address a longstanding SRV tolerance setpoint condition that has resulted in multiple TS compliance violations. [P.1.(d)] [Section 4OA2.1.c.(1)]

REPORT DETAILS

4. OTHER ACTIVITIES (OA)

4OA2 Problem Identification and Resolution (71152B)

This inspection constitutes one biennial sample of problem identification and resolution as defined by Inspection Procedure 71152. All documents reviewed during this inspection are listed in the Attachment to this report.

.1 Assessment of Corrective Action Program Effectiveness

a. Inspection Scope

The inspectors reviewed the procedures that described Exelon's corrective action program at Peach Bottom. To assess the effectiveness of the corrective action program, the inspectors reviewed performance in three primary areas: problem identification, prioritization and evaluation of issues, and corrective action implementation. The inspectors compared performance in these areas to the requirements and standards contained in 10 CFR 50, Appendix B, Criterion XVI, "Corrective Action," and Exelon procedure, LS-AA-125, "Corrective Action Program Procedure." For each of these areas, the inspectors considered risk insights from the station's risk analysis and reviewed issue reports selected across the seven cornerstones of safety in the NRCs Reactor Oversight Process. Additionally, the inspectors attended multiple Plan-of-the-Day, Station Ownership Committee, and Management Review Committee meetings. The inspectors selected items from the following functional areas for review: engineering, operations, maintenance, emergency preparedness, radiation protection, chemistry, physical security, and oversight programs.

(1) Effectiveness of Problem Identification

In addition to the items described above, the inspectors reviewed system health reports, a sample of completed corrective and preventative maintenance work orders, completed surveillance test procedures, operator logs, and periodic trend reports. The inspectors also completed field walkdowns of various systems on site, such as the emergency diesel generators and high pressure service water structures. Additionally, the inspectors reviewed a sample of IRs written to document issues identified through internal self-assessments, audits, and the operating experience program. The inspectors completed this review to verify that Exelon personnel entered conditions adverse to quality into their corrective action program as appropriate.

(2) Effectiveness of Prioritization and Evaluation of Issues

The inspectors reviewed the evaluation and prioritization of a sample of IRs issued since the last NRC biennial Problem Identification and Resolution inspection completed in August 2009. The inspectors also reviewed IRs that were assigned lower levels of significance that did not include formal cause evaluations to ensure that they were properly classified. The inspectors' review included the appropriateness of the assigned significance, the scope and depth of the causal analysis, and the timeliness of resolution. The inspectors assessed whether the evaluations identified likely causes for the issues and developed appropriate corrective actions to address the identified

causes. Further, the inspectors reviewed equipment operability determinations, reportability assessments, and extent-of-condition reviews for selected problems to verify these processes adequately addressed equipment operability, reporting of issues to the NRC, and the extent of the issues.

(3) Effectiveness of Corrective Actions

The inspectors reviewed Exelon's completed corrective actions through documentation review and, in some cases, field walkdowns to determine whether the actions addressed the identified causes of the problems. The inspectors also reviewed IRs for adverse trends and repetitive problems to determine whether corrective actions were effective in addressing the broader issues. The inspectors reviewed Exelon's timeliness in implementing corrective actions and effectiveness in precluding recurrence for significant conditions adverse to quality. The inspectors also reviewed a sample of IRs associated with selected NCVs and findings to verify that Exelon personnel properly evaluated and resolved these issues. In addition, the inspectors expanded the corrective action review to five years to evaluate Exelon personnel's actions related to safety relief valves, the high pressure service water intake structure, and material and test control equipment aspects.

b. Assessment

(1) Effectiveness of Problem Identification

Based on the selected samples, plant walkdowns, and interviews of site personnel in multiple functional areas, the inspectors determined that Exelon personnel identified problems and entered them into the corrective action program at a low threshold. Exelon staff at Peach Bottom initiated approximately 30,000 IRs between August 2009 and July 2011. The inspectors observed supervisors at the Plan-of-the-Day, Station Ownership Committee, and Management Review Committee meetings appropriately questioning and challenging IRs to ensure clarification of the issues. Based on the samples reviewed, the inspectors determined that Exelon staff trended equipment and programmatic issues, and appropriately identified problems in IRs. The inspectors verified that conditions adverse to quality identified through this review were entered into the corrective action program as appropriate. Additionally, inspectors concluded that personnel were identifying trends at low levels. In general, inspectors did not identify issues or concerns that had not been appropriately entered into the corrective action program for evaluation and resolution.

(2) Effectiveness of Prioritization and Evaluation of Issues

The inspectors determined that, in general, Exelon personnel appropriately prioritized and evaluated issues commensurate with the safety significance of the identified problem. Exelon personnel screened IRs for operability and reportability, categorized the IRs by significance, and assigned actions to the appropriate department for evaluation and resolution. The IR screening process considered human performance issues, radiological safety concerns, repetitiveness, adverse trends, and potential impact on the safety conscious work environment.

Based on the sample of IRs reviewed, the inspectors noted that the guidance provided by Exelon's corrective action program implementing procedures appeared sufficient to

ensure consistency in categorization of issues. Operability and reportability determinations were generally performed when conditions warranted and in most cases, the evaluations supported the conclusion. Causal analyses appropriately considered the extent-of-condition or problem, generic issues, and previous occurrences of the issue. However, the inspectors did note one observation in Exelon's staff evaluation of the following issue:

Exelon staff's maintenance rule evaluation of IR 1120516 (SRV setpoint drift) missed an opportunity to identify that the maintenance rule performance reliability criteria for SRV/SVs (System 01A) was not consistent with Exelon procedure ER-AA-310-1003, "Maintenance Rule – Performance Criteria Selection." Specifically, the reliability criteria threshold was not sensitive to SRV/SV lift setpoint testing/surveillance frequencies and, therefore, the criteria established (> 3 maintenance preventable functional failures per 24 months) was not an effective monitoring tool with regard to SRV/SV reliability. Notwithstanding, the inspectors determined that, overall, Exelon's system classification and maintenance rule performance monitoring of the SRV/SVs remained consistent with their maintenance rule procedures in that the SRV/SV system classification as maintenance rule (a)(2) remained valid. Therefore, the inspectors determined that the issue was of minor significance and not subject to enforcement action in accordance with the NRCs Enforcement Policy. Exelon staff documented this issue in IR 1249391.

(3) Effectiveness of Corrective Actions

The inspectors concluded that corrective actions for identified deficiencies were generally timely and adequately implemented. For significant conditions adverse to quality, Exelon staff identified actions to prevent recurrence. The inspectors concluded that corrective actions to address the sample of NRC NCVs and findings since the last problem identification and resolution inspection were timely and effective. The inspectors identified one violation regarding Exelon's resolution of a longstanding condition adverse to quality regarding SRV lift setpoints exceeding TS acceptance criteria which is documented below.

c. Findings

Introduction: The inspectors identified a finding of very low safety significance (Green) involving a NCV of 10 CFR 50 Appendix B, Criterion XVI, "Corrective Action," because Exelon staff did not implement corrective actions in a timely manner to correct safety relief valve (SRV)/safety valve (SV) lift setpoint drift in excess of Technical Specification 3.4.3, "Safety Relief Valves and Safety Valves" requirements. Specifically, Exelon staff did not implement timely or adequate actions to correct SRV lift setpoint drift that, on four occasions since 2004 and as recently as 2010, has exceeded TS surveillance acceptance criteria and resulted in TS non-compliances.

Description: Eleven SRVs and two SVs are installed in the main steam system to provide reactor pressure vessel overpressure protection and provide for automatic/manual depressurization functions. TS 3.4.3, "Safety Relief Valves and Safety Valves," requires that 11 of the 13 SRV/SVs be operable to ensure the safety function. TS surveillance requirement (SR) 3.4.3.1 requires verification that the safety function lift setpoints of the required SRV/SVs are within +/- 1% of the nominal setpoint. This surveillance testing is conducted during refueling outages when the SRV/SVs are accessible during reactor shutdown conditions.

Since 2003, six of the last eight outages at Peach Bottom have had as-found SRV/SV lift test failures outside the TS SR 3.4.3.1 acceptance criteria of $\pm 1\%$. On four of those occasions there were greater than two SRV/SV setpoint failures which resulted in non-compliance with TS 3.4.3. Each time Exelon staff initiated IRs to document the as-found conditions in the corrective action program. In general, since 2003 Exelon staff has determined that the SRV/SV setpoint drift experienced at Peach Bottom is due to overly restrictive TS setpoint criteria (1% vs. typical industry standard of 3% tolerance) and have not identified the condition to be a result of equipment reliability or maintenance-related aspects. Exelon staff has consistently determined that a TS amendment to increase the setpoint tolerance to 3%, consistent with other Exelon sites, was the appropriate corrective action to address the TS noncompliance condition that existed at both units. Exelon staff, except for the action to evaluate and submit a TS revision, have not recommended interim or long-term corrective actions to address the SRV/SV setpoint drift TS compliance issue.

The inspectors' corrective action review noted that as early as 2003 Exelon staff had discussed the option of submitting a TS revision to increase the SRV/SV setpoint tolerance. In 2007 (IR 559430), Exelon authorized a vendor to conduct a SRV/SV tolerance study to evaluate the feasibility and potential impacts of an increase in SRV/SV setpoint tolerance to 3%. Based on the results of that study, in early 2009, Exelon authorized a more comprehensive evaluation by a vendor which was completed in March 2010 and indicated a 3% tolerance would likely be acceptable with some additional site specific areas of evaluation. However, in May 2010, Exelon deferred the TS revision since an extended power up-rate project was being considered and the impacts of that power up-rate on the SRV/SV setpoint tolerance, at that time, was not fully known. Subsequently, Exelon staff identified during its most recent outage on Unit 2 in 2010 that two SRVs and one SVs failed to meet TS allowable tolerance and therefore were in violation of TS 3.4.3 as documented and submitted by Exelon in LER 05000277/2010003. Exelon staff's evaluation (IR 1216628/1120516) determined that the non-compliance issue was the result of less than aggressive implementation of a TS revision for the SRV/SV setpoint tolerance.

The inspectors' review determined that Exelon staff has not implemented timely corrective actions consistent with expectations outlined in LS-AA-125, "Corrective Action Program Procedure," in that actions have not been timely or effective to correct a long-standing condition adverse to quality (SRV lift setpoint TS non-compliances). Specifically, the inspectors determined that the action identified by the station to correct the SRV/SV setpoint drift and associated TS non-compliance aspects has not been implemented. Exelon has deferred or delayed implementation of the TS revision on several occasions. Additionally, the inspectors determined that Exelon has had several opportunities to revisit the timeliness aspects of the long term TS revision action and has not identified interim or compensatory corrective actions to mitigate future TS non-compliances with regard to SRV/SV lift setpoints. The inspectors noted that Exelon staff has implemented several SRV/SV reliability actions over the last five years to improve overall SRV reliability; however, based on interviews with engineering staff and review of corrective action documents, those actions are not expected to directly mitigate or address the TS non-compliance vulnerability that still exists regarding the SRV/SV lift setpoint.

As documented in IR 1120516/1216628, Exelon staff has actions scheduled in 2012 to conduct site specific evaluations required for the TS revision. However, the inspectors

also noted that the actual date of the TS revision submittal, based on interviews with Exelon staff, is not affirmed and may continue to be delayed due to continuing conflicts with power up-rate considerations. The inspectors determined that corrective actions resultant from IR 1120516/1216628 have not resulted in corrective actions to mitigate or address the potential for continued TS setpoint non-compliances going forward. Exelon staff initiated IR 1250472 for disposition of this issue in the station's CAP.

Analysis: The inspectors determined that the finding was more than minor because it was associated with the equipment performance attribute of the Mitigating Systems cornerstone and affected the cornerstone objective of ensuring the capability and reliability of systems that respond to initiating events to prevent undesirable consequences (i.e., core damage). Specifically, SRVs/SVs continue to experience reliability challenges associated with SRV/SV lift setpoint margin and remain vulnerable to future TS non-compliances. The inspectors evaluated the significance of this finding using IMC 0609.04, "Phase 1 – Initial Screening and Characterization of Findings." The inspectors determined that this finding was of very low safety significance (Green) because the finding was not a design or qualification deficiency, did not represent a loss of safety system function, and did not screen as potentially risk-significant due to external initiating events. The inspectors determined there had not been a loss of SRV/SV safety function with regard to SRVs/SVs being able to lift within the necessary pressure range to maintain sufficient margin to design pressure and stress limits.

The finding has a cross-cutting aspect in the area of problem identification and resolution, corrective action program, because Exelon personnel did not implement timely corrective actions to address the longstanding SRV setpoint drift conditions that have resulted in multiple TS compliance violations. [P.1.(d)]

Enforcement: 10 CFR 50, Appendix B, Criterion XVI, "Corrective Action," requires, in part, that measures shall be established to assure that conditions adverse to quality, such as failures, malfunctions, deficiencies, deviations, defective material and equipment, and non-conformances are promptly identified and corrected. Contrary to the above, Exelon staff failed to promptly implement actions and correct a condition adverse to quality associated with SRVs/SVs, on both Units 2 and 3, exceeding TS lift setpoint acceptance criteria. As a result, there have been several occasions since 2003 where TS violations have occurred with the most recent occurring on Unit 3 in 2010. Since this finding was determined to be of very low safety significance (Green) and has been entered into Exelon's corrective action program (IR 1250472) it is being treated as an NCV, consistent with the Enforcement Policy. **(NCV 05000277/278 - 2011010-01, Inadequate Corrective Actions Associated With SRV Lift Setpoint Drift)**

.2 Assessment of the Use of Operating Experience

a. Inspection Scope

The inspectors reviewed a sample of issue reports associated with review of industry operating experience to determine whether Exelon personnel appropriately evaluated the operating experience information for applicability to Peach Bottom and had taken appropriate actions, when warranted. The inspectors also reviewed evaluations of operating experience documents associated with a sample of NRC generic communications to ensure that Exelon personnel adequately considered the underlying problems associated with the issues for resolution via their corrective action program. In

addition, the inspectors observed various plant activities to determine if the station considered industry operating experience during the performance of routine and infrequently performed activities.

b. Assessment

The inspectors determined that Exelon personnel appropriately considered industry operating experience information for applicability, and used the information for corrective and preventive actions to identify and prevent similar issues when appropriate. The inspectors determined that operating experience was appropriately applied and lessons learned were communicated and incorporated into plant operations and procedures when applicable. The inspectors also observed that industry operating experience was routinely discussed and considered during the conduct of station meetings.

c. Findings

No findings were identified.

3. Assessment of Self-Assessments and Audits

a. Inspection Scope

The inspectors reviewed a sample of audits, including the most recent audit of the corrective action program, departmental self-assessments, and assessments performed by independent organizations. Inspectors performed these reviews to determine if Exelon entered problems identified through these assessments into the corrective action program, when appropriate, and whether Exelon staff initiated corrective actions to address identified deficiencies. The inspectors evaluated the effectiveness of the audits and assessments by comparing audit and assessment results against self-revealing and NRC-identified observations made during the inspection.

b. Assessment

The inspectors concluded that self-assessments, audits, and other internal Exelon assessments were generally critical, thorough, and effective in identifying issues. The inspectors observed that Exelon personnel knowledgeable in the subject completed these audits and self-assessments in a methodical manner. Exelon personnel completed these audits and self-assessments to a sufficient depth to identify issues which were then entered into the corrective action program for evaluation. In general, the station implemented corrective actions associated with the identified issues commensurate with their safety significance.

c. Findings

No findings were identified.

4 Assessment of Safety Conscious Work Environment

a. Inspection Scope

During interviews with station personnel, the inspectors assessed the safety conscious work environment at Peach Bottom. Specifically, the inspectors interviewed personnel to determine whether they were hesitant to raise safety concerns to their management and/or the NRC. The inspectors also interviewed the station Employee Concerns Program coordinator to determine what actions are implemented to ensure employees are aware of the program and its availability with regards to raising safety concerns. The inspectors reviewed the Employee Concerns Program files to ensure that Exelon staff and management entered issues into the corrective action program when appropriate.

b. Assessment

During interviews, Exelon staff expressed a willingness to use the corrective action program to identify plant issues and deficiencies and stated that they were willing to raise safety issues. The inspectors noted that no one interviewed stated that they personally experienced or were aware of a situation in which an individual had been retaliated against for raising a safety issue. All persons interviewed demonstrated an adequate knowledge of the corrective action program and the Employee Concerns Program. Based on these limited interviews, the inspectors concluded that there was no evidence of an unacceptable safety conscious work environment and no significant challenges to the free flow of information.

c. Findings

No findings were identified.

4OA6 Meetings, Including Exit

On August 12, 2011, the inspectors presented the inspection results to T. Dougherty, Site Vice President, and other members of the Exelon staff. The inspectors verified that no proprietary information was retained by the inspectors or documented in this report.

ATTACHMENT: SUPPLEMENTARY INFORMATION

SUPPLEMENTARY INFORMATION**KEY POINTS OF CONTACT**Licensee Personnel

T. Dougherty	Site Vice President
G. Stathes	Plant Manager
P. Navin	Operations Director
J. Armstrong	Regulatory Assurance Manager
P. Cowan	Work Management Director
R. Reiner	Chemistry, Environmental and Radwaste Manager
D. McClellan	Corrective Action Program Manager
S. Sullivan	Operations Support Manager
J. James	Maintenance Support Manager
H. McCrory	Technical Support Manager
B. Shortes	Radiological Engineering Manager
B. Hedrick	Shift Operations Superintendent
D. Henry	Engineering Programs Manager
R. Brower	Electrical Design Manager
J. Chizever	Mechanical Design Manager
R. Smith	Regulatory Assurance
J. Dunlap	Decontamination Advanced Radiation Worker Supervisor
T. Purcell	Electrical Design Engineering
H. Coleman	Mechanical Design Engineering
D. Lord	Mechanical Design Engineering
P. Kester	Mechanical Design Engineering
K. Hudson	Mechanical Design Engineering
J. Donell	Programs Engineering
J. Searer	Programs Engineering
G. Cilliffo	Programs Engineering
C. Burryman	Project Engineering
S. Allen	Plant Chemistry
C. Vest	Measurement and Test Equipment Tool Room Attendant
J. Lowe	Work Management Predefine Coordinator
D. Wheeler	Maintenance Rule Program Coordinator

LIST OF ITEMS OPENED, CLOSED, DISCUSSED, AND UPDATEDOpened and Closed

05000277/278/2011010-01	NCV	Inadequate Corrective Actions Associated With SRV Lift Setpoint Drift (Section 4OA2.1.c)
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LIST OF DOCUMENTS REVIEWED

Section 40A2: Problem Identification and Resolution

Audits and Self-Assessments

Corrective Action Program Focused Area Self Assessment (FASA) 2011
 NOSA-PEA-11-12 Chemistry, Radwaste, Effluent, and Environmental Monitoring Program Audit
 (AR 1202556)
 NOSA-PEA-10-10 Fire Protection Audit Report (AR 1101342)
 NOSA-PEA-09-07 Operations Audit Report (AR 964765)
 NOSA-PEA-11-03 Emergency Preparedness Audit (AR 1182406)

00878553, FASA, EACE for E-4 Diesel Panel 0DC013 K1 Relay Not Unlatching
 00999277, FASA, ASME Section XI In-service Inspection Program
 01141657, Peach Bottom Measurement and Test Equipment Check-In Self Assessment
 01130816, Maintenance Rule Functional Area Self-Assessment
 01228866, Corporate Measurement and Test Equipment Check-In Self Assessment
 01113099, FASA, Non-segregated Bus Failure and Complicated Scram response to SER-5-09
 01138918, FASA, Submerged Cables
 01222716, FASA, Standards Deficiency regarding IR 1056218

Issue Reports (* indicates that condition report was generated as a result of this inspection)

514214	979537	1030481	1073853	1116222
545165	979809	1034935	1074691	1116401
658139	982085	1038928	1076056	1116765
707459	987597	1038928	1080281	1117418
759710	987738	1039017	1080794	1117854
793791	990733	1039022	1083695	1119846
798807	991763	1039055	1085064	1119848
880090	991798	1041588	1089124	1119887
881417	991800	1042843	1090155	1120123
890940	992345	1047023	1090991	1120156
922870	992353	1051167	1094698	1120916
923239	992376	1053670	1097804	1120923
950438	992392	1056715	1099140	1121887
950439	992410	1057139	1101013	1123594
956768	992582	1059097	1102943	1124205
956798	994585	1059607	1108044	1130434
956980	994591	1061573	1108524	1131327
959926	996619	1062441	1109300	1131785
960974	998238	1063970	1110707	1134888
961259	1002703	1063984	1112350	1136659
966151	1005319	1066553	1112568	1137854
972167	1009728	1066556	1112670	1137954
972266	1013740	1068128	1112746	1137963
972272	1016621	1069325	1112859	1138056
973739	1021126	1071480	1114588	1139125
975705	1025971	1071483	1114828	1139434
977749	1027306	1073180	1115041	1140522

1144132	1179887	1200667	1225029	1248287*
1148346	1182989	1202704	1226834	1249391*
1149324	1183063	1202722	1233403	1249900*
1159362	1185227	1202752	1234191	1249910*
1161283	1185519	1207242	1235289	1249919*
1162376	1185526	1207372	1235630	1249921*
1164271	1186344	1207383	1235815	1250180*
1165331	1187298	1208493	1235840	1250180*
1165384	1187639	1210706	1240154	1250327*
1166134	1187831	1212234	1242473	1250415*
1166492	1188641	1212585	1242944	1250472*
1170006	1188695	1212601	1243567	1250710*
1171049	1189409	1212810	1247233	1250829*
1175534	1190984	1216579	1247240	
1176754	1195257	1216628	1247241	
1177133	1196006	1220238	1247247	
1177548	1196032	1222674	1247248	
1177875	1197623	1224770	1777591	
1179399	1199026	1224939	1244280*	

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NRC Information Notice 2010-26, Submerged Electrical Cables (IR 1166492)

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959926	1071480	1089124	1177875
987597	1076056	1100807	1188695
987738	1080794	1108044	1190984

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NCV 05000278/2009003-02, Inadequate Procedure Adherence Results in Trip of 3 'A' Recirc Pump and Plant Transient

NCV 05000277/2009005-01, 05000277/2009005-01, Continuously Submerged Cables Design Deficiency

FIN 05000277/2009005-02, 05000277/2009005-02, Failure to Follow Procedures and Implement the Exelon Nuclear Cable Condition Monitoring Program for Non-Safety Related Control and Power Cables within the Scope of the Maintenance Rule

NRC 05000277/2009005, Failure to maintain safety-related power cables in an environment for which they were designed and tested (IR 1013730, 1022206, 1030481)

NCV 05000277/2009008, Failure to correct procedure regarding adequate grease of contactor pins in DC breakers for HPCI and RCIC on Unit 2 and 3 (IR 897128, 950438, 950439, 972167)

NCV 05000277, 278/2010005-01, Inadequate MSIV Test Control

NCV 05000277, 278/2011002-01, FH Procedures Were Inadequate to Prevent Fuel from Contacting an Obstruction

NCV 05000277/2011007-01, 05000278/2011007-01, Failure to Demonstrate the Capability of the EDG Fuel Oil Transfer Pumps to Fulfill their Safety Functions under All Conditions

NCV 05000277/2011007-02, 05000278/2011007-02, Temporary Battery Cart Seismic Configuration Deficiency

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 PM-1048, Design Basis for Internal Flood Protection for the HPSW/ESW Pump Structure, Rev. 0
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 ER-AA-310-1002, Maintenance Rule Functions – Safety Significance Classification, Rev. 3
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ER-AA-5400-1002, Buried Piping Examination Guide, Rev. 2
ER-PB-310-1010, Attachment 4, Peach Bottom Maintenance Rule Structural Monitoring Program, Rev. 5
FH-6C, Core Component Movement – Core Transfers, Rev. 64
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LS-AA-115-1001, Processing of Significant Level 1 OPEX Evaluations, Rev. 4
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LS-AA-115-1003, Processing of Significant Level 3 OPEX Evaluations, Rev. 1
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A1395258	A1595522	A1754253	A1777856
A1395258	A1600902	A1772214	A1777857
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 NRC Information Notice 2010-26: Submerged Electrical Cables
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LIST OF ACRONYMS

ADAMS	Agency-wide Documents Access and Management System
AR	Action Request
CAP	Corrective Action Program
CFR	Code of Federal Regulations
IMC	Inspection Manual Chapter
IR	Issue Report
NCV	Non-Cited Violation
NRC	Nuclear Regulatory Commission
PARS	Publicly Available Records System
Peach Bottom	Peach Bottom Atomic Power Station
SDP	Significance Determination Process
SR	Surveillance Requirement
SRV	Safety Relief Valve
SV	Safety Valve
TS	Technical Specifications