

TENNESSEE VALLEY AUTHORITY	RECORD OF LIQUID PENETRANT EXAM	REPORT NUMBER <u>R-P3950</u>
PROJECT: <u>WBN</u> UNIT: <u>2</u> CYCLE: <u>00</u> SYSTEM: <u>CVCS</u> MATL.: <u>S</u> Thickness: <u>0.000</u> WELD/COMPONENT ID: <u>CCPH-2B-B-1A</u> CONFIG.: <u>WLD ATT</u> TO _____ PROCEDURE: <u>N-PT-9</u> REV.: <u>37</u> TC: <u>15-08</u> EXAMINATION CODE <u>PSI</u> CODE CLASS: <u>Z</u> CATEGORY: <u>C-C</u> CODE ITEM N <u>C3.30</u>		EXAMINATION DATE <u>10-31-15</u> EXAM TIME <u>1545</u> EXAM SURFACE: ID <input type="checkbox"/> OD <input checked="" type="checkbox"/> ORIGINAL EXAM: <input checked="" type="checkbox"/> RE-EXAM: <input type="checkbox"/> REF. DRAWING NO.: <u>ISI-2062A-E-01</u> VISUAL CARD S/N.: <u>393</u> PRESERVICE <input checked="" type="checkbox"/> INSERVICE <input type="checkbox"/> ACCEPTANCE CRITERIA <input type="checkbox"/> APPDX. A <input checked="" type="checkbox"/> APPDX. C <input type="checkbox"/> OTHER: _____
METHOD OF EXAMINATION		
METHOD WATER-WASHABLE FLUORESCENT DYE: <input type="checkbox"/> POST-EMULSIFIABLE FLUORESCENT DYE: <input type="checkbox"/> SOLVENT-REMOVABLE FLUORESCENT DYE: <input type="checkbox"/> WATER-WASHABLE VISIBLE DYE: <input type="checkbox"/> POST-EMULSIFIABLE VISIBLE DYE: <input type="checkbox"/> SOLVENT REMOVABLE VISIBLE DYE: <input checked="" type="checkbox"/>	PENETRANT MATERIALS BRAND NAME: <u>MAGNAFLUX</u> PENETRANT: <u>SKL-SP2</u> BATCH: <u>12G13K</u> REMOVER: <u>SKC-5</u> BATCH: <u>10M47K</u> DEVELOPER: <u>SKD-52</u> BATCH: <u>15E09K</u> BLACK LIGHT/LIGHT METER METER S/N: <u>N/A</u> CAL. DUE DATE: <u>1A</u> ILLUMINATION CARD S/N: <u>393</u>	
PART TEMP: <u>74</u> °F PYROMETER S/N: <u>E39055</u> CAL. DUE DATE: <u>06-04-2016</u>		
EXAMINATION RESULTS SATISFACTORY: <input checked="" type="checkbox"/> UNSATISFACTORY: <input type="checkbox"/> NO I NO.: <u>NONE</u> EXPLANATION OF EXAM RESULTS: <u>NO RECORDABLE INDICATIONS.</u>		
COMMENTS/LIMITATIONS: <u>LIMITED EXAM ON PUMP FEET DUE TO PUMP INSTALLATION.</u> <u>LIMITED AT BOTTOM QUADRANT OF PUMP FEET. APPROXIMATELY 75% COVERAGE.</u>		
ILLUMINATION SOURCE: <u>FUSALIGHT</u> ILLUMINATION CHECK PRE-EXAM: <input checked="" type="checkbox"/> POST EXAM: <input checked="" type="checkbox"/>		
EXAMINER: <u>BT McDonald BT McDonald</u> LEVEL: <u>II</u> EXAMINER: <u>— NA 10-31-15 —</u> LEVEL: <u>—</u> REVIEWER: <u>BC Brandon Calvery</u> LEVEL: <u>II</u> DATE: <u>4/1/16</u>		ANII: <u>[Signature]</u> DATE: <u>4-1-16</u> PAGE: <u>1 OF 1</u>