

TURKEY POINT PLANT
UNIT 4
1999 REFUELING OUTAGE INSERVICE INSPECTION REPORT

Executive Summary , *

This Inservice Inspection report is for the 1999 Turkey Point Unit 4 refueling outage. This was the second outage of the second period in the third ten-year interval.

The attached Inservice Inspection summary tables detail the examinations performed during the outage.

The attached NIS-2 forms document the repairs and replacement activities which have taken place since the previous Unit 4 submittal, as well as those performed during the 1999 refueling outage.

Inservice examinations completed during this outage:

Augmented Feedwater ultrasonic examinations were performed on the A, B, and C Steam Generator Feedwater nozzles, adjacent piping, and fittings.

Accessible Reactor Vessel internal surfaces and the RPV flange surface were visually examined.

Also examined were selected components from the Reactor Coolant, Residual Heat Removal, Safety Injection, Steam Generator Blowdown, Component Cooling Water, and Chemical and Volume Control systems.

Visual examination and functional testing of snubbers was performed in accordance with ASME Section XI, as modified by Relief Request No. 4, and Plant Technical Specifications.

System pressure testing was performed on Quality Group A, B, and C piping and components.

There were no eddy current examinations of Steam Generator tubes scheduled for this outage.

The examinations performed exceed the minimum requirements for ISI examinations for this period.

9907080068 990630
PDR ADDCK 05000251
G PDR

Turkey Point Unit 4
1999 Refueling Outage

Form NIS-1 Owners' Data Report for Inservice Inspections



FORM NIS-1 OWNERS' DATA REPORT FOR INSERVICE INSPECTIONS

Page 1 of 6

1. Owner: Florida Power & Light Company
700 Universe Blvd.
Juno Beach, Florida 33408
2. Plant: Florida Power & Light Company
Turkey Point Nuclear Power Plant
9760 SW 344 Street
Florida City, Florida 33035
3. Plant Unit: 4
4. Owner Certificate of Authorization (if required) N/A
5. Commercial Service Date : September 7, 1973
6. National Board Number for Unit: N/A
7. Components Inspected:

Component or Appurtenance	Manufacturer or Installer	Manufacturer or Installer Serial No.	State or Province No.	Nat'l Board No.
Reactor Pressure Vessel	Babcock and Wilcox	610-0116 4PSRV1	N/A	N-161
Regenerative Heat Exchanger	Westinghouse	4E200	N/A	N/A
Reactor Coolant System	Bechtel	N/A	N/A	N/A
Safety Injection System	Bechtel	N/A	N/A	N/A
Chemical and Volume Control System	Bechtel	N/A	N/A	N/A
S/G Blowdown System	Bechtel	N/A	N/A	N/A
Component Cooling Water System	Bechtel	N/A	N/A	N/A
RHR System	Bechtel	N/A	N/A	N/A
Main Feedwater System	Bechtel	N/A	N/A	N/A

1. Owner: Florida Power & Light Company, 700 Universe Blvd. Juno Beach, Florida 33408
2. Plant: Turkey Point Nuclear Power Plant, 9760 SW 344 Street, Florida City, Florida 33035
3. Plant: Unit 4
4. Owner Certificate of Authorization (if required) N/A
5. Commercial Service Date: September 7, 1973
6. National board Number for Unit: N/A

8. Examination Dates: From 03/15/99 to 04/7/99

9. Inspection Period Identification : Second Period -
04/15/97 to 04/14/01

10. Inspection Interval Identification: Third Interval,
from 04/15/94 to 04/14/04

11. Applicable Edition of Section XI 1989 Addenda None

12. Date/Revision of Inspection Plan: June 29, 1998, Rev. 1

13. Abstract of examinations and test.

Inservice examinations of selected Class 1, 2, and 3 components and piping systems of Florida Power and Light's (FPL) Turkey Point Unit 4 were performed during the 1999 refueling outage. This outage was the second outage of the second period in the third ten-year interval. The 1999 outage began on March 15, 1999 and ended on April 7, 1999.

The components and piping systems examined were selected in accordance with the *Third Ten-Year Inservice Inspection Program*, which was prepared in accordance with the requirements of the American Society of Mechanical Engineers (ASME) Section XI, 1989 Edition.

Ultrasonic, visual, magnetic particle, and liquid penetrant nondestructive techniques were used to examine components, piping, and their supports. The examinations were performed to FPL NDE procedures, and supported by examiners supplied by Raytheon Engineers & Constructors (Raytheon). See the attached report: *Inservice Inspection Summary* for examination scope and results.

There were no Steam Generator tube eddy current examinations scheduled for this outage.

Snubber functional testing and visual examinations were conducted in accordance with ASME Section XI and Turkey Point Plant Technical Specifications as allowed under Relief Request number 4. Visual examination and functional testing services were supplied by Basic-PSA, Inc. See the attached report: *Summary of Visual Examinations and Functional Testing of Snubbers* for examination scope and results.

1. Owner: Florida Power & Light Company, 700 Universe Blvd. Juno Beach, Florida 33408
2. Plant: Turkey Point Nuclear Power Plant, 9760 SW 344 Street, Florida City, Florida 33035
3. Plant: Unit 4
4. Owner Certificate of Authorization (if required) N/A
5. Commercial Service Date: September 7, 1973
6. National board Number for Unit: N/A

System pressure testing was conducted by FPL and Raytheon visual examiners to ASME Section XI and applicable plant procedures. See the attached report: *Summary of System Pressure Testing* for test boundaries and results.

Approximately one-third of the scheduled examinations for the second period were completed during this refueling outage. The remainder of the second period examinations are scheduled for completion during the next refueling outage. This meets or exceeds the requirements of Program B of ASME Section XI and applicable relief requests.

14. Abstract of Results of Examinations and Tests.

Class 1

Reactor Pressure Vessel

A B-N-1 Interior of Reactor Vessel examination was performed. There were no reportable indications noted.

Regenerative Heat Exchanger

A VT-3 visual examination was performed near the beginning of the outage to examine for boric acid crystal accumulation and evidence of leakage. A VT-2 visual examination was performed during the system leakage test prior to startup to examine for evidence of leakage. There was no reportable leakage or indications noted.

Reactor Coolant System

A support on the Pressurizer Surge line (SR-400) was re-examined per CR# 97-1560. During the re-exam, the support was found to have a loose U-bolt and inadequate thread engagement (See section 15, Abstract of Corrective Measures). Other exams included Pressurizer Spray piping welds and one additional support using surface, volumetric, and visual techniques. There were no further reportable indications noted.

1. Owner: Florida Power & Light Company, 700 Universe Blvd. Juno Beach, Florida 33408
2. Plant: Turkey Point Nuclear Power Plant, 9760 SW 344 Street, Florida City, Florida 33035
3. Plant: Unit 4
4. Owner Certificate of Authorization (if required) N/A
5. Commercial Service Date: September 7, 1973
6. National board Number for Unit: N/A

Safety Injection System

Safety Injection piping welds and supports were examined using volumetric, surface and visual techniques. There were no reportable indications noted.

Residual Heat Removal System

Residual Heat Removal piping welds and supports were examined using surface, volumetric and visual techniques. There were no reportable indications noted.

Chemical and Volume Control System

Chemical and Volume Control piping welds were examined using liquid penetrant. Piping supports, components and pressure retaining bolting were examined with visual techniques. Two restraints were found to have improper clearances (See section 15, Abstract of Corrective Measures). On two welds, rejectable linear indications were recorded (See section 15, Abstract of Corrective Measures). There were no further reportable indications noted.

Class 2

Main Feedwater System

Augmented ultrasonic examinations were performed on areas from the Steam Generator nozzle ramp out to a point of one pipe diameter on the upstream elbow, on each of the three main Feedwater lines. A previously recorded acceptable slag inclusion was noted during the exams. There were no reportable indications noted.

Steam Generator Blowdown System

Magnetic particle and visual examinations were performed on two Blowdown system supports with integral attachments. There were no reportable indications noted.

1. Owner: Florida Power & Light Company, 700 Universe Blvd. Juno Beach, Florida 33408
2. Plant: Turkey Point Nuclear Power Plant, 9760 SW 344 Street, Florida City, Florida 33035
3. Plant: Unit 4
4. Owner Certificate of Authorization (if required) N/A
5. Commercial Service Date: September 7, 1973
6. National board Number for Unit: N/A

Class 3

Component Cooling Water System

Visual exams were performed on anchors, restraints and welded attachments. On two supports, inadequate thread engagement was recorded (See section 15, Abstract of Corrective Measures).

15. Abstract of Corrective Measures

Inadequate thread engagement and a loose U-bolt were found during a VT-3 exam of RCS support SR-400. The U-bolt was tightened, and the inadequate thread engagement was evaluated to be operable as-is per CR# 99-359.

A rejectable linear indication in the base material adjacent to CVCS weld 3-CH-1401-4 was recorded during a PT exam. The indication was removed, and the indication removal area was re-examined by PT and a UT thickness verification per CR# 99-425.

A rejectable linear indication in the toe of the integral attachment weld on CVCS support SR-934 IA was recorded during a PT exam. The indication was reduced to two acceptable linear indications following grinding, and was re-examined by PT per CR# 99-426.

Improper clearance between the U-bolt and pipe was found during a VT-3 exam of CVCS support 779D. The U-bolt was adjusted, and the support was re-examined per CR# 99-427.

Improper clearance between the U-bolt and pipe was found during a VT-3 exam of CVCS support 4-VCH-63. The condition was evaluated as operable as-is per CR# 99-427.

Inadequate thread engagement was observed during a VT-3 exam of CCW anchor SR-688. The condition was evaluated as operable as-is per CR# 99-351.

Inadequate thread engagement and missing grout was observed during a VT-3 exam of CCW restraint SR-708. The grout was repaired and the inadequate thread engagement was evaluated to be operable as-is per CR# 99-351.

1. Owner: Florida Power & Light Company, 700 Universe Blvd. Juno Beach, Florida 33408
2. Plant: Turkey Point Nuclear Power Plant, 9760 SW 344 Street, Florida City, Florida 33035
3. Plant: Unit 4
4. Owner Certificate of Authorization (if required) N/A
5. Commercial Service Date: September 7, 1973
6. National board Number for Unit: N/A

We certify that a) the statements made in this report are correct, b) the examinations and tests meet the Inspection Plan as required by the ASME Code, Section XI, and c) corrective measures taken conform to the rules of the ASME Code, Section XI.

Certificate of Authorization No. N/A
 Expiration Date N/A

Date: 6/22/99 Signed: *[Signature]* By
MANAGER, CSI.

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 Dade County, Florida, and employed by Arkwright Mutual Insurance Company of Norwood, Massachusetts, have inspected the components described in this Owner's Report during the period 03/15/99 to 04/7/99, and state that to the best of my knowledge and belief, the Owner has performed examinations and tests and taken corrective measures described in the Owner's Data Report in accordance with the Inspection Plan and as required by the ASME Code, Section XI.

By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations, tests, 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

NB 8230(N)(I)
 National Board, State,
 Province, and Endorsements

Date: June 24, 1999

TURKEY POINT UNIT 4
1999 REFUELING OUTAGE

Form NIS-2 Owners' Data Report of Repairs and Replacements

Abstract

The attached NIS-2 reports detail the repair/replacement of Class 1, 2 and 3 piping and components for Florida Power and Light Company, Turkey Point Unit 4. These repairs or replacements were performed prior to and during the 1999 Unit 4 Spring refueling outage, which occurred between the dates of March 15, 1999 and April 7, 1999.

Piping and components were inspected/tested in accordance with Section XI of the American Society of Mechanical Engineers (ASME) Boiler and Pressure Vessel Code "Rules for Inservice Inspection of Nuclear Power Components," 1989 Edition with no addenda. For repair and replacement activities that utilized Code Case N-416-1, as allowed under Relief Request 16*, use of the Code Case has been documented on the NIS-2 forms.

* Relief Request 16 was authorized for use under TAC Numbers M94326 and M94327.

Report No.	Date
98-001-4	02/02/98
98-002-4	02/02/98
98-003-4	02/02/98
98-004-4	02/02/98
98-005-4	02/09/98
98-006-4	02/27/98
98-007-4	08/03/98
98-008-4	10/07/98
98-009-4	12/09/98
99-001-4	01/05/99
99-002-4	02/17/99
99-003-4	02/11/99
99-004-4	02/17/99
99-005-4	02/17/99
99-006-4	02/24/99
99-007-4	03/22/99
99-008-4	03/25/99
99-009-4	03/29/99
99-010-4	03/31/99
99-011-4	04/03/99
99-012-4	04/02/99
99-013-4	04/02/99
99-014-4	04/02/99
99-015-4	04/03/99
99-016-4	04/03/99
99-017-4	04/03/99
99-018-4	04/07/99
99-019-4	04/07/99
99-020-4	04/07/99
99-021-4	04/07/99
99-022-4	04/07/99
99-023-4	04/09/99
99-024-4	04/09/99
99-025-4	04/09/99
99-026-4	04/14/99
99-027-4	04/14/99
99-028-4	04/14/99
99-029-4	04/14/99
99-030-4	04/28/99
99-031-4	05/03/99
99-032-4	05/03/99
99-033-4	05/03/99



Report No.	Date
99-034-4	05/24/99
99-035-4	05/24/99
99-036-4	05/25/99

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

1. Owner Florida Power & Light
Name

Date 02/02/98

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #:64/3369 WO #: 97016181

9760 SW 344 Street, Florida City, Fl. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
XJ-4-1406	GARLOK	N/A	N/A	EXPANSION JOINT STOCK CODE 0014195-1	UNK	Replacement	No

7. Description of Work: REPLACE EXPANSION JOINT XJ-4-1406

SYSTEM LEAKAGE TEST PERFORMED UNDER O4-ICW-1956-L-03.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-2 Pressure 16 psig Test Temperature 79 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL JOINT NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *Samuel J. Jorgensen* *Sytek Engineering Manager* Date *Feb 2* 19 *98*
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 07/09/97 to 02/02/98 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Samuel J. Jorgensen
 Inspectors Signature

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date *2/4* 19 *98*

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

1. Owner Florida Power & Light
Name

Date 02/02/98

700 Universe Blvd. Juno Beach FL. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #:64/3516 WO #: 97016183

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
PUMP 4P9A	JOHNSTON	N/A	N/A	4P9A IST-4	N/A	Replaced	No
PUMP 4P9A	JOHNSTON	N/A	N/A	4P9A IST-5	N/A	Replacement	No

7. Description of Work: REPLACE 4A (IST-4) ICW PUMP WITH SPARE PUMP (IST-5).

SYSTEM LEAKAGE TEST PERFORMED UNDER 04-ICW-1956-L-03.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-2 Pressure 16 psig Test Temperature 79 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed *Donald H. Grogan* *System Engineering Manager* Date *FEB 10* 19 *98*
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/06/97 to 02/02/98 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

William B. Grogan
 Inspectors Signature

Commissions NB 8230 (N)(I)
 National Board, State, Providence, and Endorsements

Date *February 11* 19 *98*

FORM NIS-2 OWNERS REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner Florida Power & Light
Name
700 Universe Blvd. Juno Beach, FL 33408
Address

Date 2/2/98
Sheet 1 of 2

2. Plant Turkey Point Plant
Name
9760 SW 344 Street Florida City, FL 33035
Address

Unit 4
WO#: 96030768 01 CR#:
Repair Organization, P.O. No, Job No., etc.

3. Work Performed by Florida Power & Light
Name
9760 SW 344 Street Florida City, FL 33035
Address

Type Code Symbol Stamp N/A
Authorization Number N/A
Expiration Date N/A

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial Number	National Board	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamp Yes/No
4-50-410	STRATAFLOW	N/A	N/A	CHECK VALVE STOCK CODE 0052450-2	UNK	REPLACEMENT	NO

7. Description of Work:

REPLACED EXISTING CHECK VALVE 4-50-410 WITH SPARE. LEAKAGE TEST PERFORMED UNDER PRESSURE TEST 04-ICW-1955-F-02.

8. Tests Conducted: Pressure Pneumatic Nominal Operating Pressure X
Other VT-2 Pressure 13.5 psig Test Temperature 78 deg F

FORM NIS-2 (Back)

9. Remarks MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date: _____ N/A _____

Signed *[Signature]* Date 6/24/99
Owner or Owner's Designee, Title

OK

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period of 11/22/96 to 2/2/98 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners' Report in accordance with the requirements of 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 Owners' 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

Date 6/24/99

Commissions NB 8230 (N)(I)
National Board, State, Providence, and Endorsements

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

1. Owner Florida Power & Light
Name

Date 02/02/98

700 Universe Blvd. Juno Beach FL. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #:69/6167 WO #: 97026548 CR #: 96-1374

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
3	N/A	N/A	N/A	ICW PIPE SUPPORT	UNK	Repaired	No

7. Description of Work: MODIFY SUPPORT #3 TO EXCLUDE WATER INTRUSION.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other VT-3 Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH APPROVED PLANT PROCEDURES.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *Donald J. Magallon, System Engineering Manager* Date Feb 10 19 98
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 12/02/97 to 02/02/98 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 B. Blunt
 Inspector's Signature
 Date February 11 19 98

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

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

1. Owner Florida Power & Light
Name

Date 02/09/98

700 Universe Blvd. Juno Beach FL. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #:64/3370 WO #: 97016182

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
4-50-311	MARLIN	100257	N/A	STOCK CODE 0052545-2 UTC 0000405011	UNK	Replacement	No

7. Description of Work: REPLACE CHECK VALVE 4-50-311

SYSTEM LEAKAGE TEST PERFORMED UNDER 04-ICW-1956-L-03.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-2 Pressure 16 psig Test Temperature 79 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed: Donald J. Fongoli, System Engineering Manager Date Feb 10 1998
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 07/09/97 to 02/09/98 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Sumner K. Blount
 Inspector's Signature

Commissions NB 8230 (N)(I)
 National Board, State, Providence, and Endorsements

Date February 11, 1998

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

1. Owner Florida Power & Light
Name

Date 02/27/98

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 63/7402 WO #: 98004133 02

9760 SW 344 Street, Florida City, FL. 33035
Address

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

Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Emergency Feedwater System System #: 75 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
4-YPH-39	N/A	N/A	N/A	AFW PIPING SUPPORT	N/A	Replaced	No

7. Description of Work: REPLACED PIPE CLAMP ASSEMBLY (UTC# 334081) ON SUPPORT 4-YPH-39.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other VT-3 Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *Donald J. Smith*, *System Engineering Manager* Date *FEB 27* 19 *98*
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 02/19/98 to 02/23/98 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 B. Blum
 Inspectors Signature

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date *March 2* 19 *98*

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

1. Owner Florida Power & Light
Name

Date 08/03/98

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #: 64/7146 WO #: 98009890 01

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

Expiration Date N/A

4. Identification of System: Safety Injection System System #: 62 Quality Group: 8

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
BOLT, HEAVY HEX (8)	N/A	N/A	N/A	4-894R UTC# 409362	N/A	Replaced	No
NUT, HEAVY HEX (8)	N/A	N/A	N/A	4-894R UTC# 391981	N/A	Replaced	No

7. Description of Work: REPLACE FLANGE BOLTING ON FLANGE BETWEEN VALVE 4-894R AND REFUELING WATER

STORAGE TANK.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____
Other N/A Pressure N/A psig Test Temperature N/A °F

FORM HIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed W. J. Smith SYSTEM ENGINEERING MANAGER Date Aug 18 19 98
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period / / to / / and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

W. J. Smith
 Inspectors Signature

Commissions NB 8230 (N)(I)
 National Board, State, Providence, and Endorsements

Date 8/18 19 98

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

1. Owner Florida Power & Light
Name

Date 10/07/98

700 Universe Blvd. Juno Beach Fl. 33408

Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/4367 WO #: 97020847 01

9760 SW 344 Street, Florida City, FL. 33035

Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035

Address

4. Identification of System: Spent Fuel Pit Cooling System System #: 33 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
BONNET, VALVE	ITT ENGINEERED VALVES	N/A	N/A	UTC 410018 STK CODE 52627	UNK	Replaced	No

7. Description of Work: REPLACED BONNET ON VALVE 4-7988.

SYSTEM LEAKAGE TEST PERFORMED UNDER 04-SFPC-3332-1-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X
Other VT-2 Pressure 62 psig Test Temperature 86 °F

FORM HIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed W. [Signature] Date October 21 19 98
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 09/03/98 to 10/05/98 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 NB 8230 (N)(1)
 Inspectors Signature National Board, State, Providence, and Endorsements
 Date 10/23 19 98

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl. 33408
Address

Date 12/09/98

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Unit 4
PWO #: 64/8231 WO #: 98015323 01 CR #:98-1144

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Main Steam System System #: 72 Quality Group: B

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
ANGLE, 3 X 3 X 1/2 (1) FABRICATED	N/A	N/A	N/A	UTC 404047 STK CODE 29626 1	UNK		No
ANGLE, 4 X 3 X 1/2 (2) FABRICATED	N/A	N/A	N/A	UTC 374185 STK CODE 29660 1	UNK		No

7. Description of Work: MODIFICATION OF MOV-4-1401 SUPPORT STRUCTURE DUE TO THE INSTALLATION OF A FURMANITE BOX

PER CR 98-1144,

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____
Other VT-3 Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH APPROVED PLANT PROCEDURES.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed Robert P. Maganick Date FEB 17 1999
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 08/19/98 to 12/09/98 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 K. Blum
Inspector's Signature

Commissions NB 8230 (N)(I)
National Board, State, Providence, and Endorsements

Date February 18 1999

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

1. Owner Florida Power & Light
Name

Date 01/05/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #: 69/6949 WO #: 98005813 01 CR #:98-428

9760 SW 344 Street, Florida City, Fl. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, Fl. 33035
Address

4. Identification of System: Emergency Feedwater System System #: 75 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
BOLT, HEAVY HEX (2)	N/A	N/A	N/A	UTC 418479	UNK	Replacement	No
NUT, HEAVY HEX (2)	N/A	N/A	N/A	UTC 418459	UNK	Replacement	No

7. Description of Work: REPLACED TWO BOLTS AND TWO NUTS ON HANGER 80117-H-324-02.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other VT-3 Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned *Donald R. King, Jr. Design Manager* Date Feb 17 19 99
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 04/16/98 to 01/04/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 B. Glend
Inspector's Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date February 22 19 99

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

1. Owner Florida Power & Light
Name

Date 02/17/99

700 Universe Blvd, Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/9283 WO #: 98023845.01

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
VALVE BONNET	N/A	N/A	N/A	UTC 0000421730 STK CODE 0053117 2	UNK	Replaced	No

7. Description of Work: REPLACED BONNET ON VALVE 4-1173.

SYSTEM LEAKAGE TEST PERFORMED UNDER 04-CCW-30235-1-01

8. Tests Conducted: Hydrostatic: Pneumatic: Nominal Operating Pressure X

Other VT-2 Pressure 50 psig Test Temperature 86 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

Signed David H. Zyl Engineering Manager Date Feb 18 19 99
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 12/01/98 to 01/06/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Ernie B. Glen
 Inspectors Signature

Commissions NB 8230 (N)(I)
 National Board, State, Providence, and Endorsements

Date February 22 19 99

FORM HIS-2 OWNERS REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl. 33408
Address

Date 02/11/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Unit 4

PWO #: 64/7688 WO #: 98012656

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
ROD, THREADED 36 STUDS FABRICATED	N/A	N/A		STK CODE 29493-1 UTC 420599	N/A	Replacement	No

7. Description of Work: REPLACED (36) STUDS ON 4E207C 4C CCM NX

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other N/A Pressure _____ psig Test Temperature _____ °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned [Signature] Date Feb 17 1999
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 06/22/98 to 06/12/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date February 18 1999

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl. 33408
Address

Date 02/17/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Unit 4

PWO #: 64/6487 WO #: 98002103 01 CR #:96-1222

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
NUT, HEAVY HEX (16) 3/4"	N/A	N/A	N/A	STK CODE 27835 1 UTC 419455	UNK	Replacement	No
NUT, HEAVY HEX (4) 3/4"	N/A	N/A	N/A	STK CODE 27835 1 UTC 419456	UNK	Replacement	No
NUT, HEAVY HEX (1) 7/8"	N/A	N/A	N/A	STK CODE 27092 1 UTC 373269	UNK	Replacement	No

7. Description of Work: REPLACED (4) BASE PLATE ANCHOR NUTS ON MARK #4A. REPLACED (2) BASE PLATE ANCHOR NUTS ON MARK #4B.
REPLACED (2) BASE PLATE ANCHOR NUTS ON MARK #4C. REPLACED (2) BASE PLATE ANCHOR NUTS ON MARK #4F. REPLACED (4) BASE
PLATE ANCHOR NUTS ON MARK #8123-H-254-01. REPLACED (4) BASE PLATE ANCHOR NUTS ON MARK # 8123-H-254-02. REPLACED (1) BAS
PLATE ANCHOR NUT ON MARK #4-8046-H-190-06. REPLACED (1) BASE PLATE ANCHOR NUT ON MARK #4-8046-H-190-01. REPLACED (1) BASE
PLATE ANCHOR NUT ON MARK #C-5.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____
Other VT-3 Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed or Daniel B. Stuart Engineering Manager Date FEB 17 19 99
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/19/98 to 02/16/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Daniel B. Stuart
Inspectors Signature

Commissions NB 8230 (H)(1)

National Board, State, Providence, and Endorsements

Date February 18 19 99

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl. 33408
Address

Date 02/17/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Unit 6

PWO #: 64/9216 WO #: 98021775

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: CVC'S Charging & Letdown System System #: 47 Quality Group: B

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
CYLINDER, FLUID ASSEMBLY	N/A	N/A	N/A	STK CODE 70887 1 UTC 422184	UNK	Replacement	No
ROD, THREADED (1) STUD FABRICATED	N/A	N/A	N/A	STK CODE 29490 1 UTC 410926	UNK	Replacement	No
ROD, THREADED (8) STUDS FABRICATED	N/A	N/A	N/A	STK CODE 204436 1 UTC 418085	UNK	Replacement	No

7. Description of Work: REPLACED CHARGING PUMP 4P201B FLUID CYLINDER ASSEMBLY, (1) STUD ON SUCTION FLANGE AND (8) STUDS ON DISCHARGE FLANGE.

8. Tests Conducted: Hydrostatic: Pneumatic: Nominal Operating Pressure X

Other VT-1, VT-2 Pressure 2350 psig Test Temperature 91 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned [Signature] Date Feb 17 19 99
Owner or Owner's Designee, Title Engineering Manager

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/23/98 to 02/16/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 NB 8230 (N)(I)
National Board, State, Providence, and Endorsements

Date February 18 19 99

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl. 33408
Address

Date 02/24/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Unit 4

PWO #: 64/7687 WO #: 98012655 01

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
ROD, THREADED (36) STUDS FABRICATED	N/A	N/A	N/A	STK CODE 29493 1 UTC 420599	UNK	Replacement	No
NUT, HEAVY HEX (12) 3/4"-10	N/A	N/A	N/A	STK CODE 27847 1 UTC 418106	UNK	Replacement	No
NUT, HEAVY HEX (4) 3/4"-10	N/A	N/A	N/A	STK CODE 27847 1 UTC 396745	UNK	Replacement	No

7. Description of Work: REPLACED (36) STUDS AND (12) NUTS ON THE OUTLET END AND (4) NUTS ON INLET END OF 4B CCV HX (4E207B).

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other _____ Pressure _____ psig Test Temperature _____ °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed [Signature] - Date 3/2 1999
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 06/22/98 to 02/22/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 NB 8230 (M)(I)
National Board, State, Providence, and Endorsements
Date 3/10/99 1999

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl. 33408
Address

Date 03/22/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Unit 4

PWO #: 64/7048 WO #: 98008771 01

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired or Replacement	ASME Code Stamp Yes/No
BOLT, 1" (1)	N/A	N/A	N/A	STK CODE 71359 1	UNK	Replacement	No
8 UNC THREAD				UTC 410524			
BOLT, HEX (1)	N/A	N/A	N/A	STK CODE 71360 1	UNK	Replacement	No
				UTC 400188			

7. Description of Work: REPLACED TWO CASING BOLTS ON THE 4C COMPONENT COOLING WATER PUMP

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other N/A Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed in [Signature] Date MARCH 30 1999
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 05/11/98 to 03/22/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date March 30 1999

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach FL. 33408
Address

Date 03/25/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Unit 4

PWO #: 64/9130 WO #: 98022379 01

PCM #: 96-093

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
PCV-4-832	VARIOUS	VARIOUS	N/A	CCW HEAD TANK MODIFICATION	VAR.	Replacement	No

7. Description of Work: ADDITION OF PCV-4-832 AND ASSOCIATED PIPING, FITTINGS, SUPPORTS AND VALVES PER PC/M 96-093

INCLUDING WORK ORDER 98022379 01. CODE CASE N-416-1 WAS INVOKED FOR THIS MODIFICATION. PRESSURE TEST 04-CCW-30320-L-01

WAS PERFORMED AS REQUIRED UNDER PC/M 96-093.

8. Tests Conducted: Hydrostatic: Pneumatic: Nominal Operating Pressure X

Other VT-1,2 AND 3 Pressure 171 psig Test Temperature 78 °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH THE WELD CONTROL MANUAL.

CODE CASE N-416-1 WAS ENVOKED FOR THIS REPLACEMENT ACTIVITY.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed Robert P. Dwyer, Manager Date March 26 19 99
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 12/14/98 to 03/25/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Robert P. Dwyer
Inspector's Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date March 30 19 99

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

1. Owner Florida Power & Light
Name

Date 03/29/99

700 Universe Blvd, Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/0316 WO #: 99005046 01 CR #:99-343

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: CVCS Charging & Letdown System System #: 47 Quality Group: B

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
ROD, THREADED (8) STUDS FABRICATED	N/A	N/A	N/A	STK CODE 29499 1 UTC 403918	UNK	Replacement	No
NUT, HEAVY HEX (16)	N/A	N/A	N/A	STK CODE 27838 1 UTC 419762	UNK	Replacement	No

7. Description of Work: REPLACED (8) STUDS AND (16) NUTS ON FIC-4-154 FLANGES.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other _____ Pressure _____ psig Test Temperature _____ °F

FORM HIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned *W. J. [Signature]* Date MARCH 30 1999
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/19/99 to 03/29/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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]
Inspectors Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date MARCH 30 1999

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl. 33408
Address

Date 03/31/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Unit 6
PMO #: 64/0372 WO #: 99005048 CR #:99-476

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A
Authorization No. N/A
Expiration Date N/A

4. Identification of System: Safety Injection Accumulator Sys System #: 64 Quality Group: B

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
MUTS (8) HEAVY HEX	N/A	N/A	N/A	STK CODE 229969 1 UTC 424385	UNK	Replacement	No
MUTS (24) HEAVY HEX	N/A	N/A	N/A	STK CODE 27869 1 UTC 424390	UNK	Replacement	No
STUDS (16)	N/A	N/A	N/A	STK CODE 29516-1, UTC- 424362, 405745, 424346	UNK	Replacement	No

7. Description of Work: REPLACED 32 MUTS AND 16 STUDS ON MOV-4-865B.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____
Other VT-1 Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

Signed *Robert H. Blum* *Engineering Manager* Date *MARCH 31* 19 *99*
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/19/99 to 03/30/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Robert H. Blum
 Inspector's Signature

Commissions NB 8230 (N)(I)
 National Board, State, Providence, and Endorsements

Date *4/1* 19 *99*

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

1. Owner Florida Power & Light
Name

Date 04/03/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 6

PWO #: 64/6454 WO #: 98005482 01 CR #:97-1377

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code R31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
CHECK VALVE (1 1/2") MODEL 1 1/2"PHL-63-SW	BONNEY FORGE	N/A	N/A	4-7218 - STK CODE 222259 UTC 422387	UNK	Replacement	No
PIPE (1 1/2")	N/A	N/A	N/A	STK CODE 30687-ASME SA106 UTC 417701 CARBON STEEL	UNK	Replacement	No
ELBOW (1 1/2")	N/A	N/A	N/A	STK CODE 34037-ASME SA105 UTC 422200	UNK	Replacement	No
NUTS (8) HEAVY HEX	N/A	N/A	N/A	STK CODE 27840-UTC 415395	UNK	Replacement	No
STUDS (6)	N/A	N/A	N/A	STK CODE 29501-UTC 424097			
FLANGE	N/A	N/A	N/A	STK CODE 102064 UTC 422481-ASME SA-105	UNK	Replacement	No

7. Description of Work: REPLACED VALVE 4-7218 INCLUDING PIPE, ELBOW, FLANGE, 8 NUTS AND 4 STUDS.

CODE CASE N-416-1 WAS INVOKED FOR THIS REPLACEMENT ACTIVITY.

LEAKAGE TEST PERFORMED UNDER PRESSURE TEST 04-CCW-30315-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-1, VT-2, PT Pressure 88 psig Test Temperature 83 °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH APPROVED PLANT PROCEDURES.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

Signed Don L. Smith ENGINEER Date April 3 19 99
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/12/99 to 04/02/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

William H. Smith
Inspector's Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 4/2 19 99

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

1. Owner Florida Power & Light
Name

700 Universe Blvd. Juno Beach Fl. 33408
Address

Date 04/02/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Unit 4

PWO #: 64/9053 WO #: 98022142 01

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
RELIEF VALVE	N/A	N/A	N/A	TH18082 RV-4-1426	UNK	Replaced	No
RELIEF VALVE	N/A	N/A	N/A	TH18081 RV-4-1426	UNK	Replacement	No

7. Description of Work: REMOVE VALVE RV-4-1426 AND REPLACE WITH SPARE

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-2 Pressure 88 psig Test Temperature 83 °F

FORM NIS-2 (Back)

9. Remarks: THIS IS A BOLTED CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed *David J. Smith* Date April 3 19____
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 Dade County and employed by Wright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 02/01/99 to 04/02/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

David J. Smith
Inspector's Signature

Commissions NB 8230 (N)(I)
National Board, State, Providence, and Endorsements

Date April 3 1999

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl. 33408
Address

Date 04/02/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Unit 4

PWO #: 64/9040 WO #: 98022097 01

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
RELIEF VALVE	N/A	N/A	N/A	TH108083 RV-4-1427	UNK	Replaced	No
RELIEF VALVE	N/A	N/A	N/A	TH18079 RV-4-1427	UNK	Replacement	No

7. Description of Work: REMOVE VALVE RV-4-1427 AND REPLACE WITH SPARE.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-2 Pressure 88 psig Test Temperature 83 °F

FORM NIS-2 (Back)

9. Remarks: THIS IS MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed

CPS

Owner or Owner's Designee, Title

Date

19

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 02/01/99 to 04/02/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date

19

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

1. Owner Florida Power & Light
Name

700 Universe Blvd, Juno Beach Fl, 33408
Address

Date 04/02/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Unit 4

PWO #: 64/0381 WO #: 99005330 01 CR #:99-0344

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
RELIEF VALVE	N/A	N/A	N/A	TK36208 RV-4-1428	UNK	Replaced	No
RELIEF VALVE	N/A	N/A	N/A	TK36209 STK CODE 53514 RV-4-1428, UTC 343245	UNK	Replacement	No

7. Description of Work: REMOVE RELIEF VALVE RV-4-1428 AND REPLACE.

8. Tests Conducted: Hydrostatic: Pneumatic: Nominal Operating Pressure X

Other VT-1, VT-2 Pressure 88 psig Test Temperature 83 °F

FORM NIS-2 (Back)

9. Remarks: THIS IS A MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

Signed David J. [Signature] Date April 7 19 99
Owner or Owner's Designee, Title

CK

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/19/99 to 04/02/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date April 3 19 99

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

1. Owner Florida Power & Light
Name

Date 04/03/99

700 Universe Blvd, Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/0382 WO #: 99005331 01 CR #:99-0344

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
RELIEF VALVE	N/A	N/A	N/A	TH18085 RV-4-1429	UNK	Replaced	No
RELIEF VALVE	N/A	N/A	N/A	TH18082 RV-4-1429	UNK	Replacement	No

7. Description of Work: REMOVE RELIEF VALVE RV-4-1429 AND REPLACE WITH SPARE VALVE

8. Tests Conducted: Hydrostatic: Pneumatic: Nominal Operating Pressure X

Other VT-2 Pressure 88 psig Test Temperature 83 °F

FORM NIS-2 (Back)

9. Remarks: THIS IS A MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

signed W. Robert Galt Engineering Manager Date April 3 19 99
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period . 03/19/99 to 04/02/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Walter H. Galt
Inspector's Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date April 3 19 99

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

1. Owner Florida Power & Light Date 4/2/99
Name
700 Universe Blvd. Juno Beach, FL 33408
Address

2. Plant Turkey Point Plant Unit 4
Name
9760 SW 344 Street Florida City, FL 33035
Address
 WO#: 98005479 01 CR#: 97-1377
Repair Organization, P.O. No, Job No., etc.

3. Work Performed by Florida Power & Light Type Code Symbol Stamp N/A
Name
9760 SW 344 Street Florida City, FL 33035
Address
 Authorization Number N/A
 Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group C

5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 19 89 Edition, N/A Addenda, N-416-1 Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial Number	National Board	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamp Yes/No
CHECK VALVE (1 1/2") MODEL 1 1/2"9HL-63-SW	BONNEY FORGE	N/A	N/A	4-721A - STK CODE 222259 UTC 422387	UNK	REPLACEMENT	NO
PIPE (1 1/2")	N/A	N/A	N/A	STK CDE 30687-ASME SA106 UTC 417701 CARBON STEEL	UNK	REPLACEMENT	NO
ELBOW (1 1/2")	N/A	N/A	N/A	STK CDE 34037-ASME SA105 UTC 422200	UNK	REPLACEMENT	NO
NUTS (8) HEAVY HEX, STUDS (4)	N/A	N/A	N/A	STK CDE 27840-UTC 415395 STK CDE 29501-UTC 424097	UNK	EPLACEMENT	NO
FLANGE	N/A	N/A	N/A	STK CDE 102064 UTC 422481-ASME SA-105	UNK	EPLACEMENT	NO

7. Description of Work:

REPLACED VALVE 4-721A INCLUDING PIPING, ELBOW, FLANGE, 8 NUTS AND 4 STUDS. CODE CASE N-416-1 WAS INVOKED FOR THIS REPLACEMENT ACTIVITY. LEAKAGE TEST PERFORMED UNDER PRESSURE TEST 04-CCW-30315-L-01.

8. Tests Conducted: Pressure _____ Pneumatic _____ Nominal Operating Pressure X
 Other VT-1,VT-2,PT Pressure 88 psig Test Temperature 83 deg F

FORM NIS-2 (Back)

9. Remarks ALL WELDING PERFORMED IN ACCORDANCE WITH APPROVED PLANT PROCEDURES.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date: _____ N/A _____

Signed *Andy Kichko* Date 6/24/99
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period of 3/12/98 to 4/2/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners' Report in accordance with the requirements of 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 Owners' 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 J. Glanville
Inspector's Signature

Commissions NB 8230 (N)(I)
National Board, State, Providence, and Endorsements

Date 6/24/99

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

1. Owner Florida Power & Light
Name

Date 04/03/99

700 Universe Blvd, Juno Beach Fl, 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/6455 WO #: 98005483 01 CR #:97-1377

9760 SW 344 Street, Florida City, FL, 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL, 33035
Address

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
CHECK VALVE MODEL 1 1/2"PHL-63-SW	BONNEY FORGE	N/A	N/A	4-721C-STK CODE 222259 UTC 422387	UNK	Replacement	No
PIPE (1 1/2")	N/A	N/A	N/A	STK CODE 30687-ASME SA106 UTC 417701 CARBON STEEL	UNK	Replacement	No
ELBOW (1 1/2")	N/A	N/A	N/A	STK CODE 34037-ASME SA105 UTC 422200	UNK	Replacement	No
FLANGE	N/A	N/A	N/A	STK CODE 102064 UTC 422481-ASME SA-105	UNK	Replacement	No

7. Description of Work: REPLACED VALVE 4-721C, INCLUDING PIPE, ELBOW AND FLANGE.

CODE CASE N-416-1 WAS INVOKED FOR THIS REPLACEMENT ACTIVITY.

LEAKAGE TEST PERFORMED UNDER PRESSURE TEST 04-CCV-30315-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X
Other VT-1, VT-2, PT Pressure 88 psig Test Temperature 83 °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH APPROVED PLANT PROCEDURES.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *[Signature]* Date *April 3*, 19*99*
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/12/99 to 04/02/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 MS 8230 (H)(1)
National Board, State, Providence, and Endorsements

Date 4/2 19 99

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

1. Owner Florida Power & Light
Name

Date 04/07/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/6212 WO #: 98003506 01 CR #:98-0254

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Feedwater System System #: 74 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N416-1 Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
NUTS (4)	N/A	N/A	N/A	STK CODE 27975 UTC 409569	UNK	Replacement	No
STUDS (2)	N/A	N/A	N/A	STK CODE 28014 UTC 410522	UNK	Replacement	No
STUDS (4)	N/A	N/A	N/A	STK CODE 28031 UTC 370211	UNK	Replacement	No
STUFFING BOX COVER	N/A	N/A	N/A	STK CODE 203937 UTC 423760	UNK	Replacement	No

7. Description of Work: REPLACED STUFFING COVER, 4 NUTS AND 6 STUDS ON CV-4-2902.

CODE CASE N-416-1 WAS INVOKED FOR THIS REPAIR ACTIVITY.

SYSTEM LEAKAGE PERFORMED UNDER 04-FW-7434-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-1, VT-2 Pressure 980 psig Test Temperature 80 °F

FORM HIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, WELD REPAIR OF STUFFING BOX COVER.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Robert J. H. [Signature] Date 4/7 19 99
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/12/98 to 03/07/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Inspectors Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and EndorsementsDate 4/19 19 99

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

1. Owner Florida Power & Light
Name

Date 04/07/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #: 64/7458 WO #: 98011891 01

9760 SW 344 Street, Florida City, Fl. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, Fl. 33035
Address

4. Identification of System: Steam Generator System System #: 71 Quality Group: B

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
SECONDARY MANWAY COVER	N/A	N/A	N/A	STK CODE 75160 1 UTC 359560	UNK	Replacement	No

7. Description of Work: REPLACED STEAM GENERATOR A SECONDARY MANWAY COVER

SYSTEM LEAKAGE TEST PERFORMED UNDER 04-MS-7222-L-01

8. Tests Conducted: Hydrostatic: Pneumatic: Nominal Operating Pressure X
Other VT-2 Pressure 2291 psig Test Temperature 540 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *Richard J. Blair* ENGINEER IN CHARGE Date 4/7 19 99
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 06/10/98 to 04/07/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

William H. Blair
 Inspector's Signature

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date 4/19 19 99

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

1. Owner Florida Power & Light
Name

Date 04/07/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/5903 WO #: 98001029 01

9760 SW 344 Street, Florida City, Fl. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, Fl. 33035
Address

4. Identification of System: Emergency Feedwater System System #: 75 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
ROD, THREADED (9) STUDS FABRICATED	N/A	N/A	N/A	STK CODE 204436 1 UTC 400981	UNK	Replacement	No

7. Description of Work: REPLACED (9) STUDS ON CV-4-2816.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other N/A Pressure N/A psig Test Temperature N/A °F

99-020-4

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned [Signature] Date 4/7 19 97
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 01/22/98 to 04/07/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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]
Inspectors Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements
Date 4/19 19 99

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

1. Owner Florida Power & Light
Name

Date 04/07/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 69/7112 WO #: 98010491 01 CR #:98-0276

9760 SW 344 Street, Florida City, Fl. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, Fl. 33035
Address

4. Identification of System: Emergency Feedwater System System #: 75 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N416-1 Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
PIPE, CARBON STEEL SCHEDULE 80	N/A	N/A	N/A	STK CODE 30635 1 UTC 416324	UNK	Replacement	No
ELBOW, CARBON STEEL 90 DEGREE	N/A	N/A	N/A	STK CODE 33902 1 UTC 416323	UNK	Replacement	No

7. Description of Work: REPLACED SECTION OF STEAM SUPPLY PIPING DOWNSTREAM OF VALVE AFSS-4-004.

CODE CASE N-416-1 WAS INVOKED FOR THIS WELDED REPLACEMENT ACTIVITY

PRESSURE TESTING PERFORMED UNDER PRESSURE TEST PACKAGE: 04-AFW-7504-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-2, VT-3 Pressure 940 psig Test Temperature 296 °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH THE FPL WELD CONTROL MANUAL.

CODE CASE N-416-1 WAS INVOKED FOR THIS WELDED REPLACEMENT ACTIVITY.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *Don't R. N. Evg mbr* Date 4/7 19 99
 CK 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 05/19/98 to 04/07/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Don't R. N. Evg
 Inspector's Signature

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date 4/19 19 99

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

1. Owner Florida Power & Light
Name

Date 04/07/99

700 Universe Blvd. Juno Beach FL. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/0067 WO #: 99003180 01

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Emergency Feedwater System System #: 75 Quality Group: C

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N416-1 Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
GATE VALVE 4"	PACIFIC	0942-2	N/A	STK CODE 195717 1 UTC 392915	UNK	Replacement	No
PIPE CARBON STEEL SCHEDULE 80	UNK	N/A	N/A	STK CODE 30635 UTC 416324	UNK	Replacement	No

7. Description of Work: ADDITION OF ISOLATION VALVE AFSS-4-010 TO TRAIN 2 AFW SYSTEM.

CODE CASE N-416-1 WAS INVOKED FOR THIS WELDED REPLACEMENT ACTIVITY.

LEAKAGE TEST PERFORMED UNDER PRESSURE TEST 04-AFW-7504-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X
Other VT-2 Pressure 940 psig Test Temperature 296 °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH THE FPL WELD CONTROL MANUAL.

CODE CASE N-416-1 WAS INVOKED FOR THIS WELDED REPLACEMENT ACTIVITY.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

Signed Albert J. [Signature] Date 4/9 19 99
 CKT 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 02/24/99 to 04/07/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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]
 Inspectors Signature

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date 4/19 19 99

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

1. Owner Florida Power & Light
Name

Date 04/09/99

700 Universe Blvd. Juno Beach FL. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/7733 WO #: 9801173801 CR #:98-0847

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: CVCS Charging & Letdown System System #: 47 Quality Group: B

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N416-1 Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
PIPE, 316 S.S	N/A	N/A	N/A	STK CODE 30938 1 UTC 374075	UNK	Replacement	No
VALVE, 2" GLOBE	ROCKWELL-EDWARDS	N/A	N/A	STK CODE 53135 1 UTC 423076	UNK	Replacement	No

7. Description of Work: REPLACED VALVE 4-293B.

CODE CASE N-416-1 WAS INVOKED FOR THIS REPLACEMENT ACTIVITY.

LEAKAGE TEST PERFORMED UNDER PRESSURE TEST 04-CVCS-4764-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-2, VT-3, PT Pressure 2400 psig Test Temperature 93 °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH THE FPL WELD CONTROL MANUAL.

CODE CASE N-416-1 WAS INVOKED FOR THIS REPLACEMENT ACTIVITY.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *Dan J. Fyfe* Date 4/9 19 99
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 06/26/98 to 04/09/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

William B. Blum
 Inspectors Signature

Commissions NB 8230 (W)(1)
 National Board, State, Providence, and Endorsements

Date 4/9 19 99

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

1. Owner Florida Power & Light
Name

Date 04/09/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/5314 WO #: 97022798 01

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Main Steam System System #: 72 Quality Group: B

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
SCREW, BONNET CAP	N/A	N/A	N/A	STK CODE 180425 1 UTC 421618	UNK	Replacement	No

7. Description of Work: REPLACED (4) BONNET CAP SCREWS ON NOV-4-1401.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other VT-1 Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned [Signature] ENGINEERING MANAGER Date 4/5/99 19 99
CVT 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/05/97 to 04/09/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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]
Inspectors Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 4/19 19 99

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

1. Owner Florida Power & Light
Name

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Date 04/09/99

Sheet 1 of 2

Unit 4

PWO #: 64/9114 WO #: 98021632 01

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

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: CVCS Charging & Letdown System System #: 47 Quality Group: B

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N416-1 Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
PIPE, 316 S.S.	N/A	N/A	N/A	STK CODE 30938 1 UTC 374075	UNK	Replacement	No
VALVE, 2" GLOBE	ROCKWELL-EDWARDS	N/A	N/A	STK CODE 53135 1 UTC 423113	UNK	Replacement	No

7. Description of Work: REPLACED VALVE 4-293A.

CODE CASE N-416-1 WAS INVOKED FOR THIS REPLACEMENT ACTIVITY.

LEAKAGE TEST PERFORMED UNDER PRESSURE TEST 04-CVCS-7466-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-2,PT Pressure 2400 psig Test Temperature 95 °F

FORM HIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH FPL WELD CONTROL MANUAL.

CADE CASE N-416-1 INVOKED FOR THIS REPLACEMENT ACTIVITY.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

Signed Robert J. Blum Date Apr 22 1999
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/10/98 to 04/09/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Robert J. Blum
 Inspectors Signature

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date 4/23 1999

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

1. Owner Florida Power & Light
Name

Date 04/14/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/7326 WO #: 98011405 01

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Reactor Coolant System System #: 41 Quality Group: A

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASNE Code Stamp Yes/No
RELIEF VALVE	CROSBY	H51249-1362	N/A	UTC 407755	UNK	Replacement	No

7. Description of Work: REMOVED VALVE RV-4-551A SERIAL # 69877-01-009 AND

REPLACED IT WITH SPARE RELIEF VALVE SERIAL # H51249-1362.

8. Tests Conducted: Hydrostatic: Pneumatic: Nominal Operating Pressure X

Other VT-1, VT-2 Pressure 2291 psig Test Temperature 540 °F

FORM HIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Samuel J. [Signature] Date April 22 1999
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 06/04/98 to 04/09/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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 NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 4/23 1999

FORM NIS-2 OWNERS REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

Owner Florida Power & Light Date 4/14/99
Name
700 Universe Blvd. Juno Beach, FL 33408
Address

2. Plant Turkey Point Plant Unit 4
Name
9760 SW 344 Street Florida City, FL 33035
Address

3. Work Performed by Florida Power & Light Type Code Symbol Stamp N/A
Name
9760 SW 344 Street Florida City, FL 33035
Address

Authorization Number N/A
Expiration Date N/A

4. Identification of System: Reactor Coolant System System #: 41 Quality Group A

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial Number	National Board	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamp Yes/No
RELIEF VALVE	CROSBY	N69877-00-0005	N/A	STK CODE 6005063 UTC 402804	UNK	REPLACEMENT	NO
NUT, HEAVY HEX (1)	N/A	N/A	N/A	STK CODE 27836 1 UTC 424347	UNK	REPLACEMENT	NO

7. Description of Work:

REMOVED VALVE RV-4-551B SERIAL # 69877-01-0008 AND REPLACED IT WITH SPARE RELIEF VALVE SERIAL # N69877-00-0005. REPLACED (1) NUT ON VALVE CAP.

8. Tests Conducted: Pressure Pneumatic Nominal Operating Pressure X
Other VT-1,VT-2 Pressure 2291 psig Test Temperature 540 deg F

FORM NIS-2 (Back)

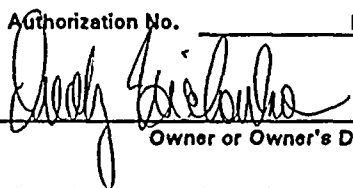
9. Remarks MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date: _____ N/A _____

Signed  Date 6/24/99
Owner or Owner's Designee, Title

cbt

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period of 6/4/98 to 4/14/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners' Report in accordance with the requirements of 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 Owners' 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 NB 8230 (N)(I)
National Board, State, Providence, and Endorsements

Date 6/24/99

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

1. Owner Florida Power & Light
Name

Date 04/14/99

700 Universe Blvd, Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/7328 WO #: 98011409 01

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Reactor Coolant System System #: 41 Quality Group: A

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
RELIEF VALVE	CROSBY	H51249-1361	N/A	STK CODE 53561 1 UTC 407754	UNK	Replacement	No

7. Description of Work: REMOVED VALVE RV-4-551C SERIAL # H51249-1580 AND REPLACE WITH SPARE RELIEF VALVE

SERIAL # H51249-1361.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-1, VT-2 Pressure 2291 psig Test Temperature 540 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned *Donnell R. [Signature]* Date April 22 19 99
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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 06/04/98 to 04/14/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Donnell R. [Signature]
Inspector's Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 4/23 19 99

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

1. Owner Florida Power & Light
Name

700 Universe Blvd. Juno Beach Fl. 33408
Address

Date 04/14/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Unit 4

PWO #: 64/7626 WO #: 98012360 01

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Reactor Coolant System System #: 41 Quality Group: A

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
SNUBBER, PSA 10 SPARE	PSA	17899	N/A	N/A	UNK	Replacement	No
SNUBBER PSA 10 SPARE	PSA	17900	N/A	N/A	UNK	Replacement	No

7. Description of Work: REPLACED SNUBBER 4-1054 SERIAL # 15718 WITH SERIAL # 17899.

REPLACED SNUBBER 4-1055 SERIAL # 7782 WITH SERIAL # 17900.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other VT-3 Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

Signed Hamid R. Zari ASME NIS-2 Date Apr 122 19 99
 CK 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 06/16/98 to 04/14/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Quinn B. Glen
 Inspector's Signature

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date 4/23 19 99

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

1. Owner Florida Power & Light
Name

700 Universe Blvd. Juno Beach FL. 33408
Address

Date 04/28/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Unit 4
PWO #: 64/0988 WO #: 99007993 01

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A
Authorization No. N/A
Expiration Date N/A

4. Identification of System: Component Cooling Water System System #: 30 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
SCREW, CAP, HEAVY HEX	N/A	N/A	N/A	STK CODE 0027123 UTC 383065	UNK	Replacement	No

7. Description of Work: REPLACE 1 BOLT ON 4B CCW HX CHANNEL HEAD COVER

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____
Other N/A Pressure _____ psig Test Temperature _____ °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed Rich Bielawski for D. TOMASZEWSKI Date 4/28 19 99

CIR 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 04/27/99 to 04/28/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.


 Inspectors Signature

 Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements
Date 4/28 19 99

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

1. Owner Florida Power & Light
Name

700 Universe Blvd. Juno Beach Fl. 33408
Address

Date 05/03/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, Fl. 33035
Address

Unit 4

PWO #: 64/5492 WO #: 97026342 01

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
PUMP 4P9B	JOHNSTON	N/A	N/A	4P9B IST-8	UNK	Replaced	No
PUMP 4P9B	JOHNSTON	N/A	N/A	4P9B IST-4	UNK	Replacement	No
ROD, THREADED (13) STUDS FABRICATED	N/A	N/A	N/A	STK CODE 29507 1 UTC 398175	UNK	Replacement	No
ROD, THREADED (7) STUDS FABRICATED	N/A	N/A	N/A	STK CODE 29507 1 UTC 415470	UNK	Replacement	No
NUT, HEAVY HEX (40)	N/A	N/A	N/A	STK CODE 27861 1 UTC 420347	UNK	Replacement	No

7. Description of Work: REPLACED THE 4B INTAKE COOLING WATER PUMP, (20) STUDS AND (40) NUTS ON THE PUMP DISCHARGE
TO THE EXPANSION JOINT.

SYSTEM LEAKAGE TEST PERFORMED UNDER 04-ICW-1957-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X
Other VT-1, VT-2 Pressure 17 psig Test Temperature 92 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Donald P. Smith Date MAY 4 19 99
 Owner or Owner's Designee, Title Onb MGR
 CK

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/28/97 to 05/03/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners 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.

Emilio B. Blue
 Inspectors Signature

Commissions NB 8230 (N)(I)
 National Board, State, Providence, and Endorsements

Date May 6 19 99

FORM HIS-2 OWNERS REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Florida Power & Light
Name

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Date 05/03/99

Sheet 1 of 2

Unit 4
PWO #: 64/5491 WO #: 97026341 01

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

Type Code Symbol Stamp N/A
Authorization No. N/A
Expiration Date N/A

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
VALVE, 24", CHECK	C0004665	N/A	N/A	STK CODE 52545 2 UTC 423733	UNK	Replacement	No
ROD, THREADED (18) STUDS FABRICATED	N/A	N/A	N/A	STK CODE 29507 1 UTC 415400	UNK	Replacement	No
ROD, THREADED (2) STUDS FABRICATED	N/A	N/A	N/A	STK CODE 29507 1 UTC 415470	UNK	Replacement	No
NUT, HEAVY HEX (23)	N/A	N/A	N/A	STK CODE 27861 1 UTC 420347	UNK	Replacement	No
NUT, HEAVY HEX (17)	N/A	N/A	N/A	STK CODE 27861 1 UTC 398176	UNK	Replacement	No

7. Description of Work: REPLACED CHECK VALVE 4-50-321, (20) STUDS AND 40 NUTS ON CHECK VALVE TO ELBOW FLANGE.

SYSTEM LEAKAGE TEST PERFORMED UNDER 04-ICW-1957-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other VT-1, VT-2 Pressure 17 psig Test Temperature 92 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

Certificate of Authorization No. _____ N/A Expiration Date _____ N/A

Signed *Samuel B. Hart* Date May 4 19 99
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/28/97 to 05/03/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners Report in accordance with the requirements of the ASME Code, Section XI.

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Samuel B. Hart
 Inspectors Signature

Commissions NB 8230 (N)(I)
 National Board, State, Providence, and Endorsements

Date May 6 19 99

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

1. Owner Florida Power & Light
Name

Date 05/03/99

700 Universe Blvd, Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/5490 WO #: 97026340 01

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Intake Cooling Water System System #: 19 Quality Group: C

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
JOINT, EXPANSION	N/A	N/A	N/A	STK CODE 14195 1 UTC 406703	UNK	Replacement	No

7. Description of Work: REPLACE EXPANSION JOINT XJ-4-1407.

SYSTEM LEAKAGE TEST PERFORMED UNDER 04-1CV-1957-L-01.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X
Other VT-2 Pressure 17 psig Test Temperature 92 °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Date MAY 4 19 99
 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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/28/97 to 05/03/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners Report in accordance with the requirements of the ASME Code, Section XI.

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[Signature]
 Inspector's Signature

Commissions NB 8230 (N)(1)
 National Board, State, Providence, and Endorsements

Date May 6 19 99

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

1. Owner Florida Power & Light
Name

Date 05/24/99

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/0493 WQ #: 99005668 01 CR #:99-0434

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: Residual Heat Removal System System #: 50 Quality Group: B

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
14"-RHR-2401-10	N/A	N/A	N/A	N/A	UNK	Repaired	No

7. Description of Work: ARC STRIKES NOTED ON PIPING WERE REMOVED BY GRINDING AS REQUIRED BY CR 99-0434.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other PT/UT Pressure N/A psig Test Temperature N/A °F

FORM HIS-2 (Back)

9. Remarks: NO VIOLATION OF MINIMUM WALL THICKNESS.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A _____

Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____

Signed *[Signature]* SYS. ENG. MGR Date 5/25 1999

CKT

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/24/99 to 05/24/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners Report in accordance with the requirements of the ASME Code, Section XI.

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[Signature]
Inspectors Signature

Commissions NB 8230 (H)(1)
National Board, State, Providence, and Endorsements

Date 5/26 1999

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

1. Owner Florida Power & Light
Name

700 Universe Blvd. Juno Beach Fl. 33408
Address

Date 05/24/99

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Unit 4

PWO #: 64/0490 WO #: 99005667 01 CR #:99-0425

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

3. Work Performed by Florida Power & Light
Name

9760 SW 344 Street, Florida City, FL. 33035
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: CVCS Charging & Letdown System System #: 47 Quality Group: A

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
3-CH-1401-4	N/A	N/A	N/A	N/A	UNK	Repaired	No

7. Description of Work: LINEAR INDICATION NOTED ON PIPING WERE REMOVED BY GRINDING AS REQUIRED BY CR 99-0426.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other PT Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: NO VIOLATION OF MINIMUM WALL THICKNESS.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned [Signature] SYS. ENG. MGR Date 5/25 1999

Owner or Owner's Designee, Title

CKT

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/25/99 to 05/24/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners Report in accordance with the requirements of the ASME Code, Section XI.

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Inspectors Signature

Commissions

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 5/26 1999

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

1. Owner Florida Power & Light
Name

Date 05/25/99

700 Universe Blvd, Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 64/0494 WO #: 99005669 01 CR #:99-0426

9760 SW 344 Street, Florida City, FL. 33035
Address

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

3. Work Performed by Florida Power & Light
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

9760 SW 344 Street, Florida City, FL. 33035
Address

4. Identification of System: CVCS Charging & Letdown System System #: 47 Quality Group: A

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
SR-934	N/A	N/A	N/A	N/A	UNK	Repaired	No

7. Description of Work: LINEAR INDICATION NOTED ON PIPING. INDICATION WAS REMOVED TO AN ACCEPTABLE SIZE PER CR 99-0426.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____

Other PT Pressure N/A psig Test Temperature N/A °F

FORM NIS-2 (Back)

9. Remarks: NO VIOLATION OF MINIMUM WALL THICKNESS.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization/No. N/A Expiration Date N/A

Signed

C/S

Owner or Owner's Designee, Title

SYS ENG MGR

Date

5/25

19 89

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 Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/25/99 to 05/24/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners Report in accordance with the requirements of the ASME Code, Section XI.

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Inspectors Signature

Commissions

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date

5/26

19 99

TURKEY POINT UNIT 4
1999 REFUELING OUTAGE

Summary of Visual Examinations and Functional Testing of Snubbers

Abstract

The attached report details the snubber inspection/testing performed for Florida Power and Light Company, Turkey Point Unit 4. These tests and inspections were performed during the Spring 1999 refueling outage, between the dates of March 15, 1999 and April 7, 1999.

Snubber inspection/testing was conducted in accordance with Plant Technical Specifications as allowed under Relief Request 4 of the Third Ten Year Interval ISI Program.



TURKEY POINT NUCLEAR PLANT
UNIT 4 CYCLE 18
MECHANICAL SHOCK ARRESTOR FINAL REPORT

Mechanical shock arrestors (snubbers) were visually inspected/handstroked and functionally tested under purchase order #00032190 by Basic-PSA personnel in accordance with the following plant/vendor procedures:

O-CMM-105.1, "Snubber Removal and Replacement"
O-OSP-105.1, "Visual Inspection of Mechanical Shock Arrestors"
O-OSP-105.2, "Functional Testing for Mechanical Shock Arrestors"
Technical Specification 3/4.7.6

A technical specification visual inspection, ASME Section XI VT-3 and a hand stroking was performed at the following tag locations:

4-1000	4-1001	4-1002	4-1004	4-1011	4-1012
4-1013	4-1014	4-1015	4-1016	4-1017	4-1018
4-1019	4-1020	4-1021	4-1022	4-1086	4-1087
4-1088	4-1089	4-1090	4-1091	4-1092	4-1094
4-1095	4-1096	4-1097	4-1098	4-1099	

A technical specification visual inspection, ASME Section XI VT-3, NO HAND STROKE, and a functional test was performed at the following tag locations:

Italics indicates Safety Related (SR) Sample snubbers
Bold indicates Quality Related (QR) Sample snubbers
Underline indicates previous rebuilds

4-1003	<u>4-1007</u>	4-1008	4-1009	<u>4-1010</u>	4-1037
4-1042	4-1043	4-1049	4-1061	4-1093	4-1100

A technical specification visual inspection, ASME Section XI VT-3, and a hand stroking was performed at the following tag locations:

4-1005 4-1006

A technical specification visual inspection, ASME Section XI VT-3 and a hand stroking was performed at the following tag locations. Upon completion of the technical specification visual inspection, ASME Section XI VT-3 and the hand stroking, the snubbers were changed out with previously rebuilt and functionally tested snubbers. The removed snubbers were rebuilt and functionally tested and will be utilized as spares for future outages.

4-1052 4-1054 4-1055 4-1056

TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T FUNCTIONAL INSPECT DATE	S T A T L DIMEN	S T A T HAND- STROKE ?	S T A T VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY			
4-1000	184	N/A	3/24/99	PASS		20.6876	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1001	18010	N/A	3/24/99	PASS		13.25	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1002	18016	N/A	3/23/99	PASS		12.8125	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1004	3168	N/A	3/18/99	PASS		27.125	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3). TORQUED LOAD STUD (PTN-I-8635, CAL. DUE DATE 8/3/99).	FUNCTIONAL TEST PERFORMED? No

TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY
4-1011	10573	N/A	3/18/99	PASS			27	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3). TORQUED LOAD STUD (PTN-I-8635, CAL. DUE DATE 8/3/99).	FUNCTIONAL TEST PERFORMED? No
4-1012	16154	N/A	3/24/99	PASS			20.5	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3).	FUNCTIONAL TEST PERFORMED? No
4-1013	17418	N/A	3/24/99	PASS			17.625	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3). INITIAL INSPECTION FOUND ONE NUT LOOSE ON WALL PLATE. (REMAINING 3 NUTS APPEAR TIGHT.) CR 99-0439 ISSUED TO ADDRESS CORRECTIVE ACTIONS FOR LOOSE NUT; WO 99005679 ISSUED TO PERFORM WORK.	FUNCTIONAL TEST PERFORMED? No
4-1014	17177	N/A	3/24/99	PASS			21	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3).	FUNCTIONAL TEST PERFORMED? No

**TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360**

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY	
4-1015	17872	N/A	3/24/99	PASS			20	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3).	FUNCTIONAL TEST PERFORMED?	No
4-1016	122	N/A	3/24/99	PASS			20.125	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	No
4-1017	118	N/A	3/24/99	PASS			20.125	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	No
4-1018	17420	N/A	3/24/99	PASS			18	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3).	FUNCTIONAL TEST PERFORMED?	No

TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T E F U N C T I O N A L I N S P E C T D A T E	S T A T E F U N C T I O N A L I N S P E C T D A T E	L DIMEN	S T A T E F U N C T I O N A L I N S P E C T D A T E	HAND- STROKE ?	S T A T E F U N C T I O N A L I N S P E C T D A T E	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY
4-1019	17426	N/A	3/24/99	PASS		16.3125	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3).	FUNCTIONAL TEST PERFORMED? No
4-1020	27101	N/A	3/17/99	PASS		17.25	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3).	FUNCTIONAL TEST PERFORMED? No
4-1021	128	N/A	3/17/99	PASS		17.1875	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3).	FUNCTIONAL TEST PERFORMED? No
4-1022	21381	N/A	3/19/99	PASS		16.4375	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No



**TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360**

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T FUNCTIONAL INSPECT DATE	S T A T L DIMEN	S T A T HAND- STROKE ?	S T A T VISUAL SUMMARY	S T A T FUNCTIONAL TEST SUMMARY			
4-1086	12993	N/A	3/18/99	PASS		27.5	PASS	Yes	PASS	INITIAL INSPECTION OF SNUBBER FOUND LOAD PIN MISSING FROM STRUT END. CR 99-0357 ISSUED TO ADDRESS CORRECTIVE ACTIONS. PIN WAS REINSTALLED WITH NEW COTTER PINS. SPHERICAL BEARING AND LOAD PIN LUBRICATED WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1087	12994	N/A	3/18/99	PASS		27.625	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1088	12995	N/A	3/18/99	PASS		26.5	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1089	12996	N/A	3/18/99	PASS		26.625	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No

TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY	
4-1090	12997	N/A	3/18/99	PASS			27.25	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	No
4-1091	12998	N/A	3/18/99	PASS			27.25	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	No
4-1092	12999	N/A	3/18/99	PASS			16.5	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	No
4-1094	17869	N/A	3/17/99	PASS			19.3125	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	No

**TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360**

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY
4-1095	17870	N/A	3/18/99	PASS			19.1875	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1096	17871	N/A	3/18/99	PASS			19.125	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1097	17852	N/A	3/18/99	PASS			19.6875	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No
4-1098	17873	N/A	3/22/99	PASS			19.625	PASS	Yes	PASS	SNUBBER WAS UNPINNED AND MANUAL HANDSTROKE ATTEMPTED. CR 99-0358 ISSUED FOR CORRECTIVE ACTIONS. SNUBBER REMOVED, TAKEN TO TEST TRAILER AND MECHANICALLY HANDSTROKED WITHIN ACCEPTABLE LIMITS. REINSTALLED, LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? No

TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY			
4-1093	17868	N/A	3/17/99	PASS	3/19/99	PASS	19.5	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED, LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH NEOLUBE (24982-3)	FUNCTIONAL TEST PERFORMED? Yes			
												STATUS PASS			
												TENSION COMPRESSION CRITERIA			
												TEST 1	72.66	89.45	750.00
												TEST 2	69.04	75.82	750.00
												TEST 3	0.005	0.008	.02g
												TEST 4	56.98	34.31	750.00
												TEST SAMPLE? Yes SAMPLE CLASS NSR			
												DATE REINSTALLED: 3/20/99			
4-1100	29498	N/A	3/23/99	PASS	3/23/99	PASS	10.8125	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED, LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED? Yes			
												STATUS PASS			
												TENSION COMPRESSION CRITERIA			
												TEST 1	4.95	5.13	17.5
												TEST 2	4.10	2.66	17.5
												TEST 3	0.010	0.011	.02g
												TEST 4	5.81	1.58	17.5
												TEST SAMPLE? Yes SAMPLE CLASS SR			
												DATE REINSTALLED: 3/23/99			

TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY	
4-1099	17423	N/A	3/19/99	PASS			16.625	PASS	Yes	PASS	REMOVED PIN FROM ONE END, HANDSTROKED AND REINSTALLED. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	No

TURKEY POINT NUCLEAR PLANT

OUTAGE SUMMARY REPORT

UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY					
4-1006	8087	N/A	3/17/99	PASS	3/19/99	PASS	26.375	PASS	Yes	PASS	REMOVED SNUBBER FOR REBUILD AND FUNCTIONAL TEST. LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	Yes				
												STATUS	PASS	(N/A IF NOT PERFORMED)			
													TENSION	COMPRESSION	CRITERIA		
												TEST 1	146.59	196.78	2500.00		
												TEST 2	85.83	120.38	2500.00		
												TEST 3	0.008	0.009	.02g		
												TEST 4	82.39	117.04	2500.00		
												TEST SAMPLE?	No	SAMPLE CLASS N/A			
												DATE REINSTALLED:	3/20/99				
4-1007	6521	N/A	3/18/99	PASS	3/19/99	PASS	26.375	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED AND TORQUED LOAD PINS. LUBRICATED SPHERICAL BEARINGS AND LOAD STUDS WITH N 5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	No				
												STATUS	PASS	(N/A IF NOT PERFORMED)			
													TENSION	COMPRESSION	CRITERIA		
												TEST 1	118.74	141.31	2500.00		
												TEST 2	113.47	117.28	2500.00		
												TEST 3	0.004	0.006	.02g		
												TEST 4	113.87	115.92	2500.00		
												TEST SAMPLE?	No	SAMPLE CLASS N/A			
												DATE REINSTALLED:	3/20/99				

**TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT**

UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- A STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY
4-1008	6485	N/A	3/17/99	PASS	3/18/99	PASS	27.75	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED AND TORQUED LOAD STUDS. LUBRICATED SPHERICAL BEARINGS AND LOAD STUDS WITH N 5000 (24974-3).	FUNCTIONAL TEST PERFORMED? Yes STATUS PASS (N/A IF NOT PERFORMED) TENSION COMPRESSION CRITERIA TEST 1 107.26 80.73 2500.00 TEST 2 99.63 26.02 2500.00 TEST 3 0.012 0.012 .02g TEST 4 101.80 27.53 2500.00 TEST SAMPLE? Yes SAMPLE CLASS NSR DATE REINSTALLED: 3/20/99
4-1009	1228	N/A	3/17/99	PASS	3/18/99	PASS	27.5	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED AND TORQUED LOAD STUDS (PTN-I-8635, CAL DUE DATE 8/3/99). LUBRICATED SPHERICAL BEARINGS WITH N-5000 (24974-3)	FUNCTIONAL TEST PERFORMED? Yes STATUS PASS (N/A IF NOT PERFORMED) TENSION COMPRESSION CRITERIA TEST 1 393.26 252.72 2500.00 TEST 2 340.64 168.64 2500.00 TEST 3 0.016 0.002 .02g TEST 4 337.29 165.32 2500.00 TEST SAMPLE? Yes SAMPLE CLASS NSR DATE REINSTALLED: 3/20/99

**TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT**

UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY				
4-1010	1204	N/A	3/18/99	PASS	3/18/99	PASS	27.25	PASS	No		VISUAL INSPECTION - SAT, 'L' DIMENSION ACCEPTABLE, NO HANDSTROKE PERFORMED, LUBRICATED SPHERICAL BEARINGS & LOAD STUDS WITH N-5000 (24974-3)	FUNCTIONAL TEST PERFORMED?	Yes			
												STATUS	PASS	(N/A IF NOT PERFORMED)		
													TENSION	COMPRESSION	CRITERIA	
												TEST 1	118.18	177.96	2500.00	
												TEST 2	117.86	144.76	2500.00	
												TEST 3	0.003	0.003	.02g	
												TEST 4	100.03	156.94	2500.00	
												TEST SAMPLE?	No	SAMPLE CLASS N/A		
												DATE REINSTALLED:	3/20/99			
4-1037	11930	N/A	3/19/99	PASS	3/21/99	PASS	26.25	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED, LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	Yes			
												STATUS	PASS	(N/A IF NOT PERFORMED)		
													TENSION	COMPRESSION	CRITERIA	
												TEST 1	155.28	118.48	2500.00	
												TEST 2	148.06	111.70	2500.00	
												TEST 3	0.003	0.003	.02g	
												TEST 4	146.49	145.54	2500.00	
												TEST SAMPLE?	Yes	SAMPLE CLASS SR		
												DATE REINSTALLED:	3/23/99			

**TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360**

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY			
4-1042	19727	N/A	3/20/99	PASS	3/21/99	PASS	17.375	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED, LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	Yes		
												STATUS	PASS	(N/A IF NOT PERFORMED)	
													TENSION	COMPRESSION	CRITERIA
												TEST 1	13.27	19.47	300.00
												TEST 2	13.67	14.72	300.00
												TEST 3	0.007	0.007	.02g
												TEST 4	12.70	13.77	300.00
												TEST SAMPLE?	Yes	SAMPLE CLASS SR	
												DATE REINSTALLED:		3/22/99	
4-1043	27099	N/A	3/20/99	PASS	3/21/99	PASS	17.375	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED, LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	Yes		
												STATUS	PASS	(N/A IF NOT PERFORMED)	
													TENSION	COMPRESSION	CRITERIA
												TEST 1	23.31	26.11	300.00
												TEST 2	19.32	16.16	300.00
												TEST 3	0.006	0.003	.02g
												TEST 4	15.88	16.02	300.00
												TEST SAMPLE?	Yes	SAMPLE CLASS SR	
												DATE REINSTALLED:		3/22/99	

TURKEY POINT NUCLEAR PLANT

OUTAGE SUMMARY REPORT

UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY				
4-1049	10169	N/A	3/19/99	PASS	3/21/99	PASS	19.75	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED, LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	Yes			
												STATUS	PASS	(N/A IF NOT PERFORMED)		
														TENSION	COMPRESSION	CRITERIA
												TEST 1	18.27	39.30	750.00	
												TEST 2	21.50	45.34	750.00	
												TEST 3	0.008	0.009	.02g	
												TEST 4	21.45	40.33	750.00	
												TEST SAMPLE?	Yes	SAMPLE CLASS NSR		
												DATE REINSTALLED:	3/21/99			
4-1052	16251	17189	3/21/99	PASS	10/5/98	PASS	21.25	PASS	Yes	PASS	REMOVED S/N 16251 AND REPLACED WITH S/N 17189. TORQUED TRANSITION TUBE BOLTING WITH TORQUE WRENCH (M471, CAL DUE DATE 4/14/99)	FUNCTIONAL TEST PERFORMED?	Yes			
												STATUS	PASS	(N/A IF NOT PERFORMED)		
														TENSION	COMPRESSION	CRITERIA
												TEST 1	26.84	59.71	300.00	
												TEST 2	22.95	71.76	300.00	
												TEST 3	0.012	0.007	.02g	
												TEST 4	16.86	66.19	300.00	
												TEST SAMPLE?	No	SAMPLE CLASS N/A		
												DATE REINSTALLED:	3/21/99			



**TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT**

UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY		
4-1054	15718	17899	3/21/99	PASS	10/7/98	PASS	21.25	PASS	Yes	PASS	REMOVED S/N 15718 AND REPLACED WITH S/N 17899. TORQUED TRANSITION TUBE BOLTING WITH TORQUE WRENCH (M471, CAL DUE DATE 4/14/99)	FUNCTIONAL TEST PERFORMED?	Yes	
												STATUS	PASS	(N/A IF NOT PERFORMED)
												TENSION	COMPRESSION	CRITERIA
												TEST 1	65.25	42.24 300.00
												TEST 2	43.94	29.26 300.00
												TEST 3	0.015	0.010 .02g
												TEST 4	39.52	25.96 300.00
												TEST SAMPLE?	No	SAMPLE CLASS N/A
												DATE REINSTALLED:		3/21/99
4-1055	7782	17900	3/21/99	PASS	10/4/98	PASS	20.75	PASS	Yes	PASS	REMOVED S/N 7782 AND REPLACED WITH S/N 17900. TORQUED TRANSITION TUBE BOLTING WITH TORQUE WRENCH (M471, CAL DUE DATE 4/14/99)	FUNCTIONAL TEST PERFORMED?	Yes	
												STATUS	PASS	(N/A IF NOT PERFORMED)
												TENSION	COMPRESSION	CRITERIA
												TEST 1	29.69	176.54 750
												TEST 2	17.74	160.29 750
												TEST 3	0.017	0.019 .02g
												TEST 4	36.79	55.85 750
												TEST SAMPLE?	No	SAMPLE CLASS N/A
												DATE REINSTALLED:		3/21/99

TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- A STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY				
4-1056	17841	17903	3/21/99	PASS	10/5/98	PASS	20.75	PASS	Yes	PASS	REMOVED S/N 17841 AND REPLACED WITH S/N 17903. TORQUED TRANSITION TUBE BOLTING WITH TORQUE WRENCH (M471, CAL DUE DATE 4/14/99)	FUNCTIONAL TEST PERFORMED?	Yes			
												STATUS	PASS	(N/A IF NOT PERFORMED)		
													TENSION	COMPRESSION	CRITERIA	
												TEST 1	40.56	49.19	750	
												TEST 2	33.41	39.63	750	
												TEST 3	0.014	0.008	.02g	
												TEST 4	33.90	39.78	750	
												TEST SAMPLE?	No	SAMPLE CLASS N/A		
												DATE REINSTALLED:	3/21/99			
4-1061	19722	N/A	3/20/99	PASS	3/21/99	PASS	16.875	PASS	No		REMOVED SNUBBER FOR FUNCTIONAL TESTING. REINSTALLED, LUBRICATED SPHERICAL BEARING AND LOAD PIN WITH N-5000 (24974-3).	FUNCTIONAL TEST PERFORMED?	Yes			
												STATUS	PASS	(N/A IF NOT PERFORMED)		
													TENSION	COMPRESSION	CRITERIA	
												TEST 1	19.09	20.91	300.00	
												TEST 2	15.52	12.36	300.00	
												TEST 3	0.009	0.010	.02g	
												TEST 4	15.23	12.37	300.00	
												TEST SAMPLE?	Yes	SAMPLE CLASS SR		
												DATE REINSTALLED:	3/22/99			



TURKEY POINT NUCLEAR PLANT

OUTAGE SUMMARY REPORT

UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY		
SPARE	15718	N/A	3/21/99	PASS	3/22/99	PASS			Yes	PASS	REMOVED FROM 4-1054 FOR HANDSTROKE AND FUNCTIONAL TESTING. WILL BE PLACED IN DRY STORAGE FOR FUTURE USE.	FUNCTIONAL TEST PERFORMED?	Yes	
												STATUS	PASS	
												TENSION	COMPRESSION	CRITERIA
												TEST 1	47.85	38.67 300.00
												TEST 2	47.29	22.26 300.00
												TEST 3	0.006	0.007 .02g
												TEST 4	42.01	17.62 300.00
												TEST SAMPLE?	No	SAMPLE CLASS N/A
												DATE REINSTALLED:		
SPARE	7782	N/A	3/21/99	PASS	3/22/99	PASS			Yes	PASS	REMOVED FROM 4-1055 FOR HANDSTROKE AND FUNCTIONAL TESTING. WILL BE PLACED IN DRY STORAGE FOR FUTURE USE.	FUNCTIONAL TEST PERFORMED?	Yes	
												STATUS	PASS	
												TENSION	COMPRESSION	CRITERIA
												TEST 1	35.30	49.05 300.00
												TEST 2	27.36	19.01 300.00
												TEST 3	0.006	0.006 .02g
												TEST 4	22.32	16.76 300.00
												TEST SAMPLE?	No	SAMPLE CLASS N/A
												DATE REINSTALLED:		

**TURKEY POINT NUCLEAR PLANT
OUTAGE SUMMARY REPORT
UNIT 4 1999 CYCLE 18 REFUELING OUTAGE WO # 98012360**

TAG #	SERIAL #	REPLACE- MENT S/N	VISUAL INSPECT DATE	S T A T	FUNCTIONAL INSPECT DATE	S T A T	L DIMEN	S T A T	HAND- STROKE ?	S T A T	VISUAL SUMMARY	FUNCTIONAL TEST SUMMARY
SPARE	17841	N/A	3/21/99	PASS	3/22/99	PASS			Yes	PASS	REMOVED FROM 4-1056 FOR HANDSTROKE AND FUNCTIONAL TESTING. WILL BE PLACED IN DRY STORAGE FOR FUTURE USE.	FUNCTIONAL TEST PERFORMED? Yes STATUS PASS TENSION COMPRESSION CRITERIA TEST 1 31.96 48.94 300.00 TEST 2 31.35 25.31 300.00 TEST 3 0.007 0.007 .02g TEST 4 36.57 22.99 300.00 TEST SAMPLE? No SAMPLE CLASS N/A DATE REINSTALLED:
SPARE	16251	N/A	3/21/99	PASS	3/22/99	PASS	21.75	PASS	Yes	PASS	REMOVED FROM 4-1052 FOR HANDSTROKE AND FUNCTIONAL TESTING. WILL BE PLACED IN DRY STORAGE FOR FUTURE USE.	FUNCTIONAL TEST PERFORMED? Yes STATUS PASS TENSION COMPRESSION CRITERIA TEST 1 19.32 56.50 300.00 TEST 2 17.21 34.50 300.00 TEST 3 0.009 0.007 .02g TEST 4 29.41 18.08 300.00 TEST SAMPLE? No SAMPLE CLASS N/A DATE REINSTALLED:

TURKEY POINT UNIT 4
1999 REFUELING OUTAGE

Summary of Inservice Inspection Examinations

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)
Class 1 CBEA STATUS Components

Page: 1

REACTOR PRESSURE VESSEL

Zone Number: 4-001	ASME	N I O
Summary Examination Area	SEC. XI	S O N G T
Number Identification	Catgy Exam	T R S E H
	Item No Method	A E I O E Remarks
	Procedure	T C G M R ** Calibration Block **

REF. DWG. NO. 5614-M-4000

010000	VESSEL INTERIOR ACCESSIBLE AREAS	B-N-1 VT-3 B13.10	NDE 4.3-24	C X - - -	03/24/1999 - VT-3 complete, NRI.
011793	VESSEL TO CLOSURE HEAD MATING SURFACE ON VESSEL	B-N-1 VT-3 B13.10	NDE 4.3-24	C X - - -	03/24/1999 - VT-3 complete, NRI.

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 2

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RP)

Class 1 CBEA STATUS Components

REACTOR COOLANT SYSTEM PRESSURIZER SURGE LINE

Zone Number: 4-016	ASME	SEC. XI	Catgy Exam	Item No Method	Procedure	N I O S O N G T T R S E H A E I O E	Remarks
Summary Examination Area							
Number Identification						T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-766-S SH. 2

062710	SR-400	F-A	VT-3	NDE 4.3-7	C - - - X	03/18/1999 - VT-3 complete, RI (CR#
	Spring Hanger	F1.10C	VT-3	NDE 4.3-22	X - - -	99-359), follow-up examination per CR#
						97-1560. 03/28/99 - VT-3 complete, NRI
						following corrective action.

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 3

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RP)

Class 1 CBEA STATUS Components

REACTOR COOLANT SYSTEM PRESSURIZER SPRAY TO PRZ.

Zone Number: 4-020	ASME	SEC. XI	Catgy Exam	Item No Method	Procedure	N I O S O N G T T R S E H A E I O E	Remarks
Number Identification						T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-566-S SH. 1

067700	4"-RC-1404-12	B-J	PT	NDE 3.3-12	C - X - -	03/21/1999 - PT complete, one acceptable
	PIPE TO VALVE 4-573	B9.11	UT-60AX	NDE 5.4-10	- - X -	rounded indication.03/24/1999 - UT
			UT-70AX	NDE 5.4-10	X - - -	complete, geometry.
			UT-38CIRC	NDE 5.4-10	X - - -	

** UT-45 N **

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 4

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

REACTOR COOLANT SYSTEM PRESSURIZER SPRAY LINE

Zone Number: 4-021		ASME	N I O		
		SEC. XI	S O N G T		
Summary Examination Area		Catgy Exam	T R S E H		
Number	Identification	Item No Method	Procedure	A E I O E	Remarks
			T C G M R	** Calibration Block **	

REF. DWG. NO. 5614-P-566-S SH. 2

072200	4"-RC-1405-11	B-J	PT	NDE 3.3-19	C X - - -	03/22/1999 - PT complete, NRI.
	PIPE TO VALVE 4-572	B9.11	UT-60AX	NDE 5.4-9	- - X - -	03/23/1999 - UT complete, geometry.
			UT-70AX	NDE 5.4-9	X - - -	
			UT-38CIRC	NDE 5.4-9	X - - -	
						** UT-45 N **

072600	4"-RC-1405-15	B-J	PT	NDE 3.3-11	C X - - -	03/21/1999 - PT complete, NRI.
	PIPE TO ELBOW	B9.11	UT-60AX	NDE 5.4-9	X - - -	03/23/1999 - UT complete, NRI.
			UT-70AX	NDE 5.4-9	X - - -	
			UT-38CIRC	NDE 5.4-9	X - - -	
						** UT-45 N **

073120	4-RCH-36X	F-A	VT-3	NDE 4.3-10	C X - - -	03/20/1999 - VT-3 complete, NRI.
	SPRING HANGER	F1.10C				

073200	4"-RC-1405-21	B-J	PT	NDE 3.3-20	C X - - -	03/23/1999 - PT complete, NRI.
	PIPE TO ELBOW	B9.11	UT-60AX	NDE 5.4-9	- - X - -	03/23/1999 - UT complete, geometry.
			UT-70AX	NDE 5.4-9	X - - -	
			UT-38CIRC	NDE 5.4-9	X - - -	
						** UT-45 N **

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 5

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

Chemical and Volume Control Auxiliary Spray Line

Zone Number: 4-035	ASME	N I O
	SEC. XI	S O N G T
Summary Examination Area	Catgy Exam	T R S E H
Number Identification	Item No Method	A E I O E Remarks
	Procedure	T C G M R ** Calibration Block **
-----	-----	-----

REF. DWG. NO. 5614-P-782-S SH. 1

110600	2"-RC-1410-24 PIPE TO ELBOW	B-J PT B9.40	NDE 3.3-16	C X - - -	03/22/1999 - PT complete, NRI.
110700	2"-RC-1410-25 ELBOW TO PIPE	B-J PT B9.40	NDE 3.3-16	C X - - -	03/22/1999 - PT complete, NRI.
110750	779D DOUBLE ACTING RESTRAINT	F-A VT-3 F1.10B VT-3	NDE 4.3-15 NDE 4.3-23	C - - - X X - - -	03/21/1999 - VT-3 complete, RI (CR# 99-427). 03/27/1999 - VT-3 complete, NRI following corrective action.

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 6

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

RESIDUAL HEAT REMOVAL TO RC LOOP A COLD LEG

Zone Number: 4-037	ASME	NI O
	SEC. XI	S O N G T
Summary Examination Area	Catgy Exam	T R S E H
Number Identification	Item No Method	A E I O E Remarks
	Procedure	T C G M R ** Calibration Block **
-----	-----	-----

REF. DWG. NO. 5614-P-509-S SH. 1

117350	SR-450D	F-A VT-3	NDE 4.3-16	C - - - X	03/22/1999 - VT-3 complete, NRI
	DOUBLE ACTING RESTRAINT	F1.10B			(conditions noted were previously
					acceptable per NCR-86-10, NCR-215-86,
					NCR-360-86).

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 7

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

RESIDUAL HEAT REMOVAL TO RC LOOP B COLD LEG

Zone Number: 4-038		ASME	N I O	
Summary Examination Area		SEC. XI	S O N G T	
Number Identification		Catgy Exam	T R S E H	
		Item No Method	A E I O E Remarks	
		Procedure	T C G M R ** Calibration Block **	

REF. DWG. NO. 5614-P-509-S SH. 3

121500	10"-SI-1402-1	B-J	PT	NDE 3.3-18	C	X - - -	03/22/1999 - PT complete, NRI.
	VALVE 4-875E TO ELBOW	B9.11	UT-60 AX	NDE 5.4-2	-	- X -	03/24/1999 - UT complete, geometry.
			UT-45LAX	NDE 5.4-2	X	- - -	
			UT-45 CIRC	NDE 5.4-2	X	- - -	
** UT-27 **							

121800	10"-SI-1402-4	B-J	PT	NDE 3.3-18	C	X - - -	03/22/1999 - PT complete, NRI.
	ELBOW TO TEE	B9.11	UT-60 AX	NDE 5.4-2	-	- X -	03/24/1999 - UT complete, geometry.
			UT-45LAX	NDE 5.4-2	X	- - -	
			UT-45 CIRC	NDE 5.4-2	X	- - -	
** UT-27 **							



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 8

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

RESIDUAL HEAT REMOVAL TO RC LOOP C COLD LEG

Zone Number: 4-039	ASME	NI O
Summary Examination Area	SEC. XI	S O N G T
Number Identification	Catgy Exam	T R S E H
	Item No Method	A E I O E Remarks
	Procedure	T C G M R ** Calibration Block **
-----	-----	-----

REF. DWG. NO. 5614-P-509-S SH. 4

125870	8073-H-810-01	F-A VT-3	NDE 4.3-6	C - - - X	03/17/1999 - VT-3 complete, RI (no CR -
	DOUBLE ACTING RESTRAINT	F1.10B VT-3	NDE 4.3-21	X - - -	lubricate and re-exam per STD-C-011).
					03/27/1999 - VT-3 complete, NRI
					following corrective action.

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 9

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

CHEMICAL & VOLUME CONTROL TO RC LOOP C HOT LEG

Zone Number: 4-045	ASME			N I O	
	SEC. XI			S O N G T	
Summary Examination Area	Catgy Exam			T R S E H	
Number Identification	Item No Method	Procedure		A E I O E	Remarks
				T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-782-S SH. 2

151900	3"-CH-1401-4	B-J PT	NDE 3.3-13	C - - - X	03/22/1999 - PT complete, RI
	PIPE TO TEE	B9.21 PT	NDE 3.3-27	X - - -	(CR#99-425). 03/24/1999 - PT complete, NRI following corrective action.
151940	SR-934	F-A VT-3	NDE 4.3-11	C X - - -	03/20/1999 - VT-3 complete, NRI.
	SPRING HANGER	F1.10C			
151980	SR-934 IA	B-K PT	NDE 3.3-14	C - - - X	03/22/1999 - PT complete, RI
	INTEGRAL ATTACHMENT	B10.10 PT	NDE 3.3-28	- X - -	(CR#99-426). 03/24/1999 - PT complete following corrective action, reduced to two acceptable linear indications.

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 10

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

CHEMICAL & VOLUME CONTROL TO RC LOOP A COLD LEG

Zone Number: 4-046	ASME	N I O
	SEC. XI	S O N G T
Summary Examination Area	Catgy Exam	T R S E H
Number Identification	Item No Method	A E I O E Remarks
	Procedure	T C G M R ** Calibration Block **
-----	-----	-----

REF. DWG. NO. 5614-P-782-S SH. 3

161350	SR-942	F-A VT-3	NDE 4.3-12	C X - - -	03/21/1999 - VT-3 complete, NRI.
	DOUBLE ACTING RESTRAINT	F1.10B			(drawing discrepancy).

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 11

INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)
Class 1 CBEA STATUS Components

CHEMICAL AND VOLUME CONTROL TO REGENERATIVE HX

Zone Number: 4-047	ASME	N I O
	SEC. XI	S O N G T
Summary Examination Area	Catgy Exam	T R S E H
Number Identification	Item No Method	A E I O E Remarks
	Procedure	T C G M R ** Calibration Block **
-----	-----	-----

REF. DWG. NO. 5614-P-551-S SH. 1

163050	4-VCH-63	F-A VT-3	NDE 4.3-20	C - - - X	03\24\1999 - VT-3 complete, RI
	DOUBLE ACTING RESTRAINT	F1.10B			(CR#99-444 - evaluated "use as is").
163860	SR-491	F-A VT-3	NDE 4.3-9	C X - - -	03/19/1999 - VT-3 complete, NRI.
	DOUBLE ACTING RESTRAINT	F1.10B			

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 12

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

CHEMICAL & VOLUME CONTROL FROM THE REGENERATIVE HX

Zone Number: 4-049		ASME	N I O		
		SEC. XI	S O N G T		
Summary Examination Area		Catgy Exam	T R S E H		
Number	Identification	Item No Method	Procedure	A E I O E	Remarks
				T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-553-S SH. 3

170500	2"-CH-1402-20 PIPE TO TEE	B-J PT B9.40	NDE 3.3-10	C X - - -	03/21/1999 - PT complete, NRI.
170600	2"-CH-1402-21 TEE TO PIPE	B-J PT B9.40	NDE 3.3-10	C X - - -	03/21/1999 - PT complete, NRI.
170700	2"-CH-1402-22 PIPE TO RO-4-3436	B-J PT B9.40	NDE 3.3-8	C X - - -	03/21/1999 - PT complete, NRI.
171000	2"-CH-1402-25 TEE TO PIPE	B-J PT B9.40	NDE 3.3-10	C X - - -	03/21/1999 - PT complete, NRI.
171200	2"-CH-1402-27 ELBOW TO PIPE	B-J PT B9.40	NDE 3.3-9	C - X - -	03/21/1999 - PT complete, two acceptable rounded indications.
171300	2"-CH-1402-28 PIPE TO RO-4-3435	B-J PT B9.40	NDE 3.3-7	C X - - -	03/21/1999 - PT complete, NRI.



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 13

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 1 CBEA STATUS Components

CHEMICAL & VOLUME CONTROL, REGENERATIVE HEAT EXCH

Zone Number: 4-059	ASME	N I O
	SEC. XI	S O N G T
Summary Examination Area	Catgy Exam	T R S E H
Number Identification	Item No Method	A E I O E Remarks
	Procedure	T C G M R ** Calibration Block **
-----	-----	-----

REF. DWG. NO. 5614-M-4009

199290	RGX 4E200	VT-2	NDE 4.2-1	C X - - -	03/17/1999 - VT-3 complete, NRI (exam
	VISUAL FOR LEAKAGE	VT-3	NDE 4.3-8	X - - -	per relief request #3). 04/6-1999 - VT-2
					complete (OP-1004.1).



RESIDUAL HEAT REMOVAL TO RESID. HEAT REMOVAL PUMP A

T C G M R ** Calibration Block **

REF. DWG. NO. 5614-P-503-S SH. 1

★★ UT-33 ★★

★★ UT-33 ★★

★★ UT-33 ★★

★★ UT-33 ★★





Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 17

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 2 CBEA STATUS Components

RESIDUAL HEAT REMOVAL DISCHARGE OUTSIDE CONTAINMEN

Zone Number: 4-068		ASME	N I O	
		SEC. XI	S O N G T	
Summary Examination Area		Catgy Exam	T R S E H	
Number	Identification	Item No Method	Procedure	A E I O E Remarks
			T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-505-S SH. 1

218500	12"-RHR-2401-2	C-F-1 PT	NDE 3.3-24	C X - - - 03/24/1999 - PT complete, NRI.
	REDUCER TO TEE	C5.11 UT-60AX	NDE 5.4-8	X - - - 03/25/1999 - UT complete, NRI.
		UT-45CIRC	NDE 5.4-8	X - - -
** UT-35 **				

REF. DWG. NO. 5614-P-505-S SH. 3

219550	SR-635	F-A VT-3	NDE 4.3-2	C X - - - 03/15/1999 - VT-3 complete - NRI.
	SPRING HANGER	F1.20C		

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 18

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 2 CBEA STATUS Components

RESIDUAL HEAT REMOVAL INSIDE & OUTSIDE CONTAINMENT

Zone Number: 4-069	ASME	N I O
Summary Examination Area	SEC. XI	S O N G T
Number Identification	Catgy Exam	T R S E H
	Item No Method	A E I O E
	Procedure	T C G M R
		** Calibration Block **

REF. DWG. NO. 5614-P-505-S SH. 3

222600	12"-RHR-2402-26	C-F-1 PT	NDE 3.3-4	C X - - -	03/15/1999 - PT complete - NRI.
	ELBOW TO PIPE	C5.11 UT-60AX	NDE 5.4-14	- - X -	03/25/1999 - UT complete, geometry.
		UT-70AX	NDE 5.4-14	- - X -	
		UT-45CIRC	NDE 5.4-14	X - - -	
					** UT-35 **
222655	CONTAINMENT PEN. P-2	F-A VT-3	NDE 4.3-3	C X - - -	03/15/1999 - VT-3 complete - NRI.
	ANCHOR	F1.20D			



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 19

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 2 CBEA STATUS Components

RESIDUAL HEAT REMOVAL SYSTEM INSIDE CONTAINMENT

Zone Number: 4-081		ASME	N I O		S O N G T		
Summary Examination Area		SEC. XI	T R S E H		A E I O E		
Number	Identification	Catgy	Exam	Item No	Method	Procedure	Remarks
		Item No	Method			T C G M R	** Calibration Block **
<u>REF. DWG. NO. 5614-P-509-S SH. 2</u>							
233490	10"-SI-2407-4	C-F-1	PT	NDE 3.3-17	C - X - -	03/22/1999 - PT complete, acceptable	
	PIPE TO VALVE 4-885	C5.11	UT-60 AX	NDE 5.4-5	- - X -	linear indication. 03/24/1999 - UT	
			UT-45L AX	NDE 5.4-5	X - - -	complete, geometry.	
			UT-70 AX	NDE 5.4-5	X - - -		
			UT-45 CIRC	NDE 5.4-5	X - - -	** UT-27 **	
233500	10"-SI-2407-5	C-F-1	PT	NDE 3.3-23	C X - - -	03/23/1999 - PT complete, NRI.	
	VALVE 4-885 TO ELBOW	C5.11	UT-60 AX	NDE 5.4-5	- - X -	03/24/1999 - UT complete, geometry.	
			UT-45LAX	NDE 5.4-5	X - - -		
			UT-70 AX	NDE 5.4-5	X - - -		
			UT-45 CIRC	NDE 5.4-5	X - - -	** UT-27 **	



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)
Class 2 CBEA STATUS Components

Page: 20

RESIDUAL HEAT REMOVAL SYSTEM INSIDE CONTAINMENT

Zone Number: 4-084		ASME	N I O		
		SEC. XI	S O N G T		
Summary Examination Area		Catgy Exam	T R S E H		
Number Identification		Item No Method	Procedure	A E I O E	Remarks
				T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-509-S SH. 4

234680	8"-SI-2402-14	C-F-1	PT	NDE 3.3-25	C X - - -	03/24/1999 - PT complete, NRI.
	PIPE TO ELBOW	CS.11	UT-60LAX	NDE 5.4-13	- - X -	03/24/1999 - UT complete, geometry.
			UT-45LAX	NDE 5.4-13	- - X -	
			UT-45LCIRC	NDE 5.4-13	X - - -	
						** UT-41 **

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 21

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 2 CBEA STATUS Components

RESIDUAL HEAT REMOVAL SYSTEM INSIDE CONTAINMENT

Zone Number: 4-086		ASME	N I O	
		SEC. XI	S O N G T	
Summary Examination Area		Catgy Exam	T R S E H	
Number	Identification	Item No Method	Procedure	A B I O E Remarks
			T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-509-S SH. 1

236500	8"-SI-2404-2	C-P-1 PT	NDE 3.3-22	C - X - -	03/23/1999 - PT complete, acceptable
	PIPE TO VALVE 4-876A	CS.11 UT-60LAX	NDE 5.4-11	- - X -	rounded indication. 03/23/1999 - UT
		UT-45LAX	NDE 5.4-11	X - - -	complete, geometry.
		UT-45LCIRC	NDE 5.4-11	X - - -	
					** UT-41 **

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 22

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RP)

Class 2 CBEA STATUS Components

SAFETY INJECTION TO CONTAINMENT SPRAY PUMP B

Zone Number: 4-087		ASME	N I O	
		SEC. XI	S O N G T	
Summary Examination Area		Catgy Exam	T R S E H	
Number	Identification	Item No Method	Procedure	A E I O E Remarks
			T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-502-S SH. 1

237140	H-218A	F-A VT-3	NDE 4.3-1	C X - - - 03/15/1999 - VT-3 complete - NRI
	ANCHOR	F1.20D		



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 23

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 2 CBEA STATUS Components

RESIDUAL HEAT REMOVAL SYSTEM INSIDE CONTAINMENT

Zone Number: 4-089		ASME		N I O	
		SEC. XI		S O N G T	
Summary Examination Area		Catgy Exam		T R S E H	
Number	Identification	Item No	Method	Procedure	A E I O E Remarks
				T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-509-S SH. 1

240600	8"-SI-2407-8 TEE TO PIPE	C-F-1	PT	NDE 3.3-15	C - X - -	03/22/1999 - PT complete, three
		C5.11	UT-60LAX	NDE 5.4-12	- - X -	acceptable rounded
			UT-45LAX	NDE 5.4-12	- - X -	indications.03/24/1999 - UT complete,
			UT-45LAX	NDE 5.4-12	X - - -	geometry.
						** UT-41 **
241250	SR-450E SINGLE ACTING RESTRAINT		VT-3	NDE 4.3-18	C X - - -	03/23/1999 - VT-3 complete, NRI.
241350	SR-445 DOUBLE ACTING RESTRAINT		VT-3	NDE 4.3-17	C X - - -	03/23/1999 - VT-3 complete, NRI.





Page: 24

ASME

S O N G T

T R S E H

Catgy	Exam
-------	------

A	E	I	O	E	Remarks
---	---	---	---	---	---------

Item No	Method
1	Method 1
2	Method 2
3	Method 3
4	Method 4
5	Method 5
6	Method 6
7	Method 7
8	Method 8
9	Method 9
10	Method 10
11	Method 11
12	Method 12
13	Method 13
14	Method 14
15	Method 15
16	Method 16
17	Method 17
18	Method 18
19	Method 19
20	Method 20
21	Method 21
22	Method 22
23	Method 23
24	Method 24
25	Method 25
26	Method 26
27	Method 27
28	Method 28
29	Method 29
30	Method 30
31	Method 31
32	Method 32
33	Method 33
34	Method 34
35	Method 35
36	Method 36
37	Method 37
38	Method 38
39	Method 39
40	Method 40
41	Method 41
42	Method 42
43	Method 43
44	Method 44
45	Method 45
46	Method 46
47	Method 47
48	Method 48
49	Method 49
50	Method 50
51	Method 51
52	Method 52
53	Method 53
54	Method 54
55	Method 55
56	Method 56
57	Method 57
58	Method 58
59	Method 59
60	Method 60
61	Method 61
62	Method 62
63	Method 63
64	Method 64
65	Method 65
66	Method 66
67	Method 67
68	Method 68
69	Method 69
70	Method 70
71	Method 71
72	Method 72
73	Method 73
74	Method 74
75	Method 75
76	Method 76
77	Method 77
78	Method 78
79	Method 79
80	Method 80
81	Method 81
82	Method 82
83	Method 83
84	Method 84
85	Method 85
86	Method 86
87	Method 87
88	Method 88
89	Method 89
90	Method 90
91	Method 91
92	Method 92
93	Method 93
94	Method 94
95	Method 95
96	Method 96
97	Method 97
98	Method 98
99	Method 99
100	Method 100

Procedure

T C G M R ** Calibration Block **

3

C-F-1 PT
C5.21 UT-60 AX
UT-70 AX
UT-38 CIRC

NDE 3.3-1
NDE 5.4-1
NDE 5.4-1
NDE 5.4-1

```
C X - - - 03/15/1999 - PT complete - NRI.
X - - - 03/22/1999 - UT complete - NRI.
X - - -
X - - -
      ** UT-47 **
```

C-F-1 PT
C5.21 UT-60AX
UT-70AX
UT-38CIRC

NDE 3.3-2
NDE 5.4-1
NDE 5.4-1
NDE 5.4-1

C X - - - 03/15/1999 - PT complete - NRI (welded
X - - - obstruction but >90% CRS). 03/22/1999 -
X - - - UT complete - NRI.
X - - -

** UT-47 **



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)
Class 2 CBEA STATUS Components

Page: 25

HIGH HEAD SAFETY INJECTION

Zone Number: 4-098		ASME	N I O		
		SEC. XI	S O N G T		
Summary Examination Area		Catgy Exam	T R S E H		
Number Identification		Item No Method	Procedure	A E I O E	Remarks
			T C G M R	** Calibration Block **	

REF. DWG. NO. 5614-P-783-S SH. 3

257885	2"-SI-2408-10 PIPE TO ELBOW	C-F-1 PT C5.30	NDE 3.3-3	C X - - -	03/15/1999 - PT complete - NRI.
257888	2"-SI-2408-11 ELBOW TO PIPE	C-F-1 PT C5.30	NDE 3.3-3	C X - - -	03/15/1999 - PT complete - NRI.



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 26

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RP)

Class 2 CBEA STATUS Components

STEAM GENERATOR A BLOWDOWN INSIDE CONTAINMENT

Zone Number: 4-105		ASME	N I O		
Summary Examination Area		SEC. XI	S O N G T		
Catgy Exam			T R S E H		
Number Identification		Item No Method	Procedure	A E I O E	Remarks
				T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-790-S SH. 1

270440	78102B-H-420-03 DOUBLE ACTING RESTRAINT	F-A VT-3 F1.20B	NDE 4.3-13	C X - - -	03/21/1999 - VT-3 complete, NRI (drawing discrepancy).
270460	78102B-H-420-03 IA INTEGRAL ATTACHMENT	C-C MT C3.20	NDE 2.2-2	C X - - -	03/21/1999 - MT complete, NRI.



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 27

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RP)

Class 2 CBEA STATUS Components

STEAM GENERATOR C BLOWDOWN INSIDE CONTAINMENT

Zone Number: 4-107		ASME	N I O		
		SEC. XI	S O N G T		
Summary Examination Area		Catgy Exam	T R S E H		
Number Identification		Item No Method	Procedure	A E I O E	Remarks
				T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-785-S SH. 1

276450	78102B-H-422-03	F-A VT-3	NDE 4.3-14	C X - - -	03/21/1999 - VT-3 complete, NRI.
	DOUBLE ACTING RESTRAINT	F1.20B			
276460	78102B-H-422-03 IA	C-C MT	NDE 2.2-1	C - X - -	03/21/1999 - MT complete, acceptable
	INTEGRAL ATTACHMENT	C3.20			linear indication.



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RP)
Class 2 CBEA STATUS Components

Page: 28

MAIN FEEDWATER SYSTEM LOOP A

Zone Number: 4-111		ASME	N I O	
		SEC. XI	S O N G T	
Summary Examination Area		Catgy Exam	T R S E H	
Number	Identification	Item No Method	Procedure	A E I O E Remarks
			T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-557-S SH. 1

284460	Augmented Exam	AUG	UT-60AX	NDE 5.16-2	A - - X -	03/20/1999 - UT complete, geometry.
	FROM NOZZLE RAMP TO 1 PIPE					
	DIA. ON ELBOW					

** UT-20, UT-29 **



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)
Class 2 CBEA STATUS Components

Page: 29

MAIN FEEDWATER SYSTEM LOOP B

Zone Number: 4-112		ASME	N I O		
		SEC. XI	S O N G T		
Summary Examination Area		Catgy Exam	T R S E H		
Number Identification		Item No Method	Procedure	A E I O E	Remarks
				T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-558-S SH. 1

286980	Augmented Exam	AUG	UT-60AX	NDE 5.16-3	A - - X -	03/21/1999 - UT complete, geometry.
	FROM NOZZLE RAMP TO 1 PIPE					
	DIA. ON ELBOW					

** UT-20, UT-29 **



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)
Class 2 CBEA STATUS Components

Page: 30

MAIN FEEDWATER SYSTEM LOOP C

Zone Number: 4-113		ASME	N I O	
Summary Examination Area		SEC. XI	S O N G T	
Catgy Exam		T R S E H		
Number Identification		Item No Method	Procedure	A E I O E Remarks
			T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-789-S SH. 1

289650	Augmented Exam	AUG	UT-60AX	NDE 5.16-1	A - - X - 03/19/1999 - UT complete, geometry.
	FROM NOZZLE RAMP TO 1 DIA. ON				
	ELBOW				

** UT-20, UT-29 **



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 31

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 3 CBEA STATUS Components

COMPONENT COOLING WATER FROM RHR HEAT EXCHANGER A

Zone Number: 4-126		ASME	N I O	
Summary Examination Area		SEC. XI	S O N G T	
Number	Identification	Catgy Exam	T R S E H	
		Item No Method	Procedure	A E I O E Remarks
				T C G M R ** Calibration Block **

REF. DWG. NO. 5614-P-518-S SH. 4

298000	SR-688	F-A VT-3	NDE 4.3-5	C - - - X	03/15/1999 - VT-3 complete, RI
	ANCHOR	F1.30D			(CR#99-351 - evaluated "use as is").
298050	SR-688 IA	D-A VT-1	NDE 4.1-2	C X - - -	03/15/1999 - VT-1 complete, NRI.
	INTEGRAL ATTACHMENT	D1.20			



Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 32

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 3 CBEA STATUS Components

COMPONENT COOLING WATER SYSTEM OUTSIDE CONTAINMENT

Zone Number: 4-139		ASME	N I O	
Summary Examination Area		SEC. XI	S O N G T	
Number Identification		Catgy Exam	T R S E H	
		Item No Method	Procedure	A E I O E Remarks
			T C G M R	** Calibration Block **

REF. DWG. NO. 5614-P-506-S SH. 2

305500	SR-708	F-A	VT-3	NDE 4.3-4	C - - - X	03/15/1999 - VT-3 complete, RI
	DOUBLE ACTING RESTRAINT	F1.30B				(CR#99-349 - evaluated "use as is").
305600	SR-708 IA	D-A	VT-1	NDE 4.1-1	C X - - -	03/15/1999 - VT-1 complete, NRI.
	INTEGRAL ATTACHMENTS	D1.20				

Date: 04/15/1999

TURKEY POINT NUCLEAR PLANT UNIT 4

Page: 33

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, SECOND PERIOD, SECOND OUTAGE (99RF)

Class 3 CBEA STATUS Components

COMPONENT COOLING WATER TO RHR HEAT EXCHANGER A

Zone Number: 4-140	ASME			N I O	
	SEC. XI			S O N G T	
Summary Examination Area	Catgy Exam			T R S E H	
Number Identification	Item No Method	Procedure		A E I O E	Remarks
				T C G M R	** Calibration Block **
-----	-----	-----		- - - -	-----

REF. DWG. NO. 5614-M-4010

306550	4-RHE-A-UPPER Support HEAT EXCHANGER UPPER SUPPORT	F-A VT-3 F1.40H	NDE 4.3-19	C X - - -	03/24/1999 - VT-3 complete, NRI.
306560	4-RHE-A-UPPER Support IA INTEGRAL ATTACHMENT	D-A VT-1 D1.10	NDE 4.1-3	C X - - -	03/24/1999 - VT-1 complete, NRI.



TURKEY POINT UNIT 4
1999 REFUELING OUTAGE

Summary of System Pressure Testing



Abstract

This report details the pressure testing of selected class 1, 2 and 3 piping and components of the Florida Power and Light Company Turkey Point Unit 4 cycle 18 which were performed during the spring 1999 refueling outage. This outage occurred between the dates of March 15, 1999 and April 7, 1999, and covers the dates from November 1, 1997 through April 9, 1999. This pressure testing is being reported following the second outage of the second period for 3rd ten year interval for Turkey Point Unit 4.

Piping and components were selected and tested in accordance with Section XI of the American Society of Mechanical Engineers (ASME) Boiler and Pressure Vessel Code "Rules for Inservice Inspection of Nuclear Power Components", 1989 Edition with no addenda with specific relief as granted under 10 CFR 50.55a.



Procedures

The following Florida Power and Light (FPL) procedures and documents have been implemented to provide instructional guidance for the performance of the required ASME XI pressure testing and subsequent inspections.

OP-1004.1 Reactor Coolant System-System Leak Test Following RCS Opening.

4-OSP-45.1 ASME Section XI Quality Group A Bolting Examination*

4-OSP-45.2 ASME Section XI Quality Group B Bolting Examination*

0-ADM-523 ASME Section XI Pressure Tests for Quality Group A, B, C
Systems/Components.

4-OSP-041.2 Reactor Coolant System Visual Leak Inspection and Leak Evaluation.

NDE-4.2 Visual Examination VT-2 Conducted During System Pressure Tests.

*Relief Request No 18, Use of Code Case N-533 Authorized for Turkey Point Units 3 and 4 (TAC NOS. M98149 AND M98150).



System Summary:

The following safety related Class 1, 2, and 3 systems, or sections thereof were pressure tested in accordance with the requirements of the 1989 ASME Section XI Code.

System Name	System Number
Component Cooling Water	30
Reactor Coolant	41
Chemical and Volume Control	47
Residual Heat Removal	50
Safety Injection	62
Safety Injection (Accumulator)	64
Main Steam	72
Feedwater	74
Auxiliary Feedwater	75

Acronyms

ADM:	Administrative
ASME:	American Society of Mechanical Engineers
CSS:	Containment Spray System
CCW:	Component Cooling Water
CVCS:	Chemical Volume Control System
ECC:	Emergency Containment Cooler
FW:	Feedwater
HX:	Heat Exchanger
ICW:	Intake Cooling Water
NDE:	Non Destructive Examination
PWO:	Plant Work Order
PZR:	Pressurizer
RCP:	Reactor Coolant Pump
RHR:	Residual Heat Removal
RO:	Restricting Orifice
RV:	Relief Valve
RX:	Reactor
SFPC:	Spent Fuel Pool Cooling
SG:	Steam Generator
WO:	Work Order

Test Package Development

The specific pressure test boundaries were selected after review of the applicable plant Operating diagram/code boundary drawings. The piping systems were broken into sub systems. The sub-systems were selected based on Technical Specifications operability requirements, acceptable isolation points and availability of test connections and vent valves. The sub-systems were then assigned test package numbers, which could be tested in entirety, or based on availability could be broken down further into numerous tests within the specific sub-system.

The pressure test package numbers contain six (6) segments of information,

Sample: 04-CCW-30110-I-01
 ^ ^ ^ ^ ^ ^
 1 2 3 4 5 6

1. Unit Number (00) common to both units 3 and 4. (03) Unit specific. (04) Unit specific.
2. System abbreviation
3. System number [First (2) digits].
4. Sub-system number [(2) or (3) digits].
5. Type of test (H) Hydrostatic, (P) Pneumatic, (L) Leakage, (F) Functional, (I) Inservice, (S) Static head.
6. Number of test performed within the specific sub-system.

COMPONENT COOLING WATER SYSTEM 30

04-CCW-30315-L-01 Test Date: 04/01/99

This test was performed due to the replacement of valve 4-721C under WO # 98005483 and Condition Report 97-1377. No leakage was observed during this test.

04-CCW-30316-L-01 Test Date: 04/01/99

This test was performed due to the replacement of valve 4-721B under WO # 98005482 and Condition Report 97-1377. No leakage was observed during this test.

04-CCW-30317-L-01 Test Date: 04/01/99

This test was performed due to the replacement of valve 4-721A under WO # 98005479 and Condition Report 97-1377. No leakage was observed during this test.

04-CCW-30318-L-01 Test Date: 04/01/99

This test was performed due to the replacement of valve RV-4-1427 under WO # 98022097. No leakage was observed during this test.

04-CCW-30319-L-01 Test Date: 04/01/99

This test was performed due to the replacement of valve RV-4-1426 under WO # 98022142. No leakage was observed during this test.

04-CCW-30320-L-01 Test Date: 03/17/99

This test was performed due to the installation of PCV-4-832 for the CCW Head Tank per PC/M 96-093 and WO # 98022379. No leakage was noted during this test.

04-CCW-30321-L-01 Test Date: 04/01/99

This test was performed due to the replacement of valve RV-4-1428 under WO # 99005330. No leakage was observed during this test.

04-CCW-30322-L-01 Test Date: 04/01/99

This test was performed due to the replacement of valve RV-4-1429 under WO # 99005331. No leakage was observed during this test.



COMPONENT COOLING WATER SYSTEM 30 (CONTINUED)

04-CCW-30216-I-02 Test Date 03/17/99

This test was performed to meet the 1989 Edition of ASME Section XI periodic pressure test requirements. No leakage was noted during this test.

04-CCW-30217-I-02 Test Date 03/15/99

This test was performed to meet the 1989 Edition of ASME Section XI periodic pressure test requirements. No leakage was noted during this test.

04-CCW-30218-I-02 Test Date 03/15/99

This test was performed to meet the 1989 Edition of ASME Section XI periodic pressure test requirements. No leakage was noted during this test.

04-CCW-30221-I-02 Test Date 03/15/99

This test was performed to meet the 1989 Edition of ASME Section XI periodic pressure test requirements. No leakage was noted during this test.

04-CCW-30222-I-02 Test Date 03/15/99

This test was performed to meet the 1989 Edition of ASME Section XI periodic pressure test requirements. No leakage was noted during this test.

04-CCW-30223-I-02 Test Date 03/15/99

This test was performed to meet the 1989 Edition of ASME Section XI periodic pressure test requirements. No leakage was noted during this test.

04-CCW-30235-I-01 Test Date: 12/04/98

This test was performed due to replacement of the bonnet for valve 4-1173 under WO # 98023845. No leakage was noted during this test.

REACTOR COOLANT SYSTEM 41

04-RCS-4111-L-03 Test Date 04/06/99

This test involved the leakage test of the Reactor Coolant System piping inside containment following the Unit 4 Cycle 18 Refueling Outage. This leakage test addressed the following replacements.

Component	WO #	Replaced
RV-4-551A	98011405	Remove, install spare
RV-4-551B	98011407	Remove, install spare
RV-4-551C	98011409	Remove, install spare



**CHEMICAL AND VOLUME CONTROL CHARGING AND LETDOWN
SYSTEM 47**

04-CVCS-4764-L-01 Test date: 04/06/99

This leakage test is being performed due to replacement of valve 4-293B under WO # 98011738. No leakage was observed during this test.

04-CVCS-4765-L-01 Test date: 02/12/99

This leakage test is being performed due to replacement of the 4B charging pump block under WO # 98021775. No leakage was observed during this leakage test.

04-CVCS-4766-L-01 Test date: 04/06/99

This leakage test is being performed due to replacement of valve 4-293A under WO # 98021632. No leakage was observed during this test.

04-CVCS-4767-L-01 Test date: 04/06/99

This leakage test is being performed due to replacement of valve RV-4-203 with a spare valve under WO # 98009247. No leakage was observed during this test.

04-CVCS-4757-I-02 Test date: 03/15/99

This Inservice test was performed to meet the ASME Section XI 1989 Edition periodic pressure test requirements. No through wall leakage was observed.

04-CVCS-4758-I-02 Test date: 03/15/99

This Inservice test was performed to meet the ASME Section XI 1989 Edition periodic pressure test requirements. No leakage was observed during test.

04-CVCS-4759-I-02 Test date: 03/15/99

This Inservice test was performed to meet the ASME Section XI 1989 Edition periodic pressure test requirements. No leakage was observed during test.

RESIDUAL HEAT REMOVAL SYSTEM 50

04-RHR-5014-F-02 Test Date: 03/20/99

This Functional pressure test was performed to meet ASME Section XI 1989 Edition periodic pressure test requirements.

04-RHR-5017-F-02 Test Date: 03/27/99

This Functional pressure test was performed to meet ASME Section XI 1989 Edition periodic pressure test requirements. No leakage was observed during this functional test.

SAFETY INJECTION SYSTEM 62

04-SIS-6224-F-01 Test Date: 04/01/99

This test was performed to meet ASME Section XI 1989 Edition periodic pressure test requirements. No leakage was observed during this functional test.



SAFETY INJECTION (ACCUMULATORS) SYSTEM 64

04-SIS-6402-F-03 Test date: 03/15/99

This functional test was performed to meet ASME Section XI 1989 Edition periodic pressure test requirements. No through wall leakage was observed.

MAIN STEAM SYSTEM 72

04-MS-7217-I-02 Test Date: 03/15/99

This Inservice test was performed to meet ASME Section XI 1989 Edition periodic pressure test requirements. No leakage observed during this test.

04-MS-7218-I-02 Test Date: 03/15/99

This Inservice test was performed to meet ASME Section XI 1989 Edition periodic pressure test requirements. No leakage observed during this test.

04-MS-7219-I-02 Test Date: 03/15/99

This Inservice test was performed to meet ASME Section XI 1989 Edition periodic pressure test requirements. No leakage observed during this test.

04-SG-7222-L-01 Test Date: 04/06/99

This test was performed due to replacement of the manway for 4A steam generator secondary side under WO # 98011891. No leakage was observed during this test.

FEEDWATER SYSTEM 74

04-FW-7434-L-01 Test Date: 04/06/99

This leakage was performed due to replacement of the stuffing box cover for valve CV-4-2902 under WO # 98003506. No leakage was observed during this test.

AUX FEEDWATER SYSTEM 75

04-AFW-7557-L-01 Test Date: 03/16/99

This leakage test was performed due to addition of valve AFSS-4-010 under PC/M 99-001 and WO # 99003180. No leakage was observed during this test.

04-AFW-7504-L-01 Test Date: 04/07/99

This leakage test was performed due to replacement of piping downstream of valve AFSS-4-004 under WO # 98010491 and Condition Report 98-0276. This test also covered the Unit 4 portion of valve AFSS-4-010 which was added under PC/M 99-001 and WO # 99003180. No leakage was noted during this test.

