



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION IV  
1600 EAST LAMAR BOULEVARD  
ARLINGTON, TEXAS 76011-4511

February 12, 2019

Ms. Mary J. Fisher, Vice President  
Energy Production & Nuclear  
Decommissioning  
Omaha Public Power District  
Fort Calhoun Station  
Mail Stop FC-2-4  
9610 Power Lane  
Blair, NE 68008

SUBJECT: FORT CALHOUN STATION – NRC INSPECTION REPORT 050-00285/2019-001

Dear Ms. Fisher:

This letter refers to the U.S. Nuclear Regulatory Commission's (NRC's) inspection conducted on January 14-17, 2019, at the Fort Calhoun Station (FCS) located near Blair, Nebraska. The NRC inspectors discussed the results of this inspection with you and members of your staff during a final exit meeting conducted on January 17, 2019. The inspection results are documented in the enclosure to this letter.

The NRC inspection examined activities conducted under your license as they relate to public health and safety, common defense and security, and to confirm compliance with the Commission's rules and regulations, and with the conditions of your license. Within these areas, the inspection consisted of selected examination of procedures and representative records, observations of activities, conduct of radiation surveys, and interviews with personnel. Specifically, the inspectors reviewed your planned decommissioning activities to support SAFSTOR and DECON conditions at the facility, controls for spent fuel safety, organization and management systems, and the implementation of the solid radioactive waste management and transportation of radioactive materials program. No violations within the scope of the inspection were identified and no response to this letter is required.

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

If you have any questions regarding this inspection report, please contact Stephanie Anderson at 817-200-1213, or the undersigned at 817-200-1151.

Sincerely,

/RA/

Janine F. Katanic, PhD, CHP, Chief  
Fuel Cycle and Decommissioning Branch  
Division of Nuclear Materials Safety

Docket No.: 050-00285

License No.: DPR-40

Enclosure:

NRC Inspection Report 05000285/2019-001

w/Attachment: Supplemental Information

**U.S. NUCLEAR REGULATORY COMMISSION**

**REGION IV**

Docket No.: 050-00285

License No.: DPR-40

Report No.: 050-00285/2019-001

Licensee: Omaha Public Power District

Facility: Fort Calhoun Station

Location: 9610 Power Lane  
Blair, Nebraska

Inspection Dates: January 14-17, 2019

Inspectors: Stephanie G. Anderson, Health Physicist  
Fuel Cycle and Decommissioning Branch  
Division of Nuclear Materials Safety

Harry A. Freeman, Senior Reactor Inspector  
Inspection Program and Assessments Team  
Division of Reactor Safety

N. Jeff Griffis, CHP, Senior Health Physicist  
Specialized Technical Training & Support Branch  
Office of the Chief Human Capital Officer

Approved By: Janine F. Katanic, PhD, CHP, Chief  
Fuel Cycle and Decommissioning Branch  
Division of Nuclear Materials Safety

Enclosure

## **EXECUTIVE SUMMARY**

### **Fort Calhoun Station NRC Inspection Report 050-00285/2019-001**

This U.S. Nuclear Regulatory Commission's (NRC's) inspection was a routine, announced inspection of decommissioning activities being conducted at the Fort Calhoun Station under NRC Inspection Report 050-00285/2019-001. In summary, the licensee was conducting these activities in accordance with site procedures, license requirements, and applicable NRC regulations. Within the scope of the inspection, no violations were identified.

#### **Decommissioning Performance and Status Review at Permanently Shutdown Reactors**

The licensee was implementing the decommissioning activities in accordance with the regulations and license requirements. The inspectors determined that the licensee was adequately controlling decommissioning activities and radiological work areas at the facility. (Section 1.2)

#### **Spent Fuel Pool Safety at Permanently Shutdown Reactors**

The licensee's spent fuel pool was being maintained in accordance with permanently defueled technical specifications and procedural requirements. The licensee was safely storing the spent fuel assemblies contained in the spent fuel pool. (Section 2.2)

#### **Organization, Management, and Cost Controls at Permanently Shutdown Reactors**

The licensee maintained an overall organizational structure to support decommissioning activities as required by the Permanently Defueled Technical Specifications and Post-Shutdown Decommissioning Activities Report. The licensee was implementing its employee concerns and safety conscious work environment programs in which individuals could raise concerns without fear of retaliation. (Section 3.2)

#### **Solid Radioactive Waste Management and Transportation of Radioactive Materials**

The licensee was packaging and shipping radioactive wastes in accordance with regulatory requirements and with the appropriate documentation and shipping papers. (Section 4.2)

## **Report Details**

### **Summary of Plant Status**

On June 24, 2016, Omaha Public Power District (OPPD), the licensee, formally notified the NRC by letter of its intent to permanently cease operations of the Fort Calhoun Station (FCS) (ADAMS Accession ML16176A213). By letter dated November 13, 2016, OPPD notified the NRC that it had permanently ceased power operations at the FCS on October 24, 2016, and certified pursuant to Title 10 of the *Code of Federal Regulations* (CFR) 50.82(a)(1)(ii), that as of November 13, 2016, all fuel had been permanently removed from the FCS's reactor vessel and placed into the spent fuel pool (ADAMS Accession ML16319A254).

On December 28, 2016, the NRC informed the licensee that it was no longer under NRC Inspection Manual Chapters 0305, "Operating Reactor Assessment Program"; 0608, "Performance Indicator Program"; and 2515, "Light-Water Reactor Inspection Program" when conducting oversight activities and assessing site performance (ADAMS Accession ML16363A449). The licensee was informed that the NRC's oversight of licensed activities under decommissioning would be conducted under the provisions in NRC Inspection Manual Chapter 2561, "Decommissioning Power Reactor Inspection Program."

The licensee submitted its Post-Shutdown Decommissioning Activities Report (PSDAR) on March 30, 2017 (ADAMS Accession ML17089A759). The PSDAR is not a licensing action, and therefore, is not approved by the NRC; however, the NRC reviews the report. The licensee's PSDAR described the decommissioning activities and schedule to support SAFSTOR strategy for the facility, which is one of the options allowed by the NRC for decommissioning. The NRC subsequently held a public meeting in Omaha, Nebraska, on May 31, 2017, to discuss and accept comments regarding the FCS's PSDAR. The transcript of the public meeting is available in ADAMS (ADAMS Accession ML17160A394).

The licensee initially selected the SAFSTOR decommissioning option, as described in the PSDAR. The PSDAR described that the licensee planned to continue in SAFSTOR until the spent fuel is transferred to the U.S. Department of Energy in 2058. On October 11, 2018, however, the OPPD board voted to change its decommissioning approach from SAFSTOR to DECON. DECON will consist of decontamination and deconstruction of the site in a process that will begin much sooner on a date to be determined by OPPD.

On April 12, 2017, Region IV closed the confirmatory action letter regarding the resolution of design issues that had been documented during the NRC Inspection Manual Chapter 0350 operation period, based on the FCS's commitment to either: (1) complete the design and licensing basis reconstitution for spent fuel pool/cooling and supporting structures, systems, and components, or (2) submit a license amendment request for an independent spent fuel cooling system (ADAMS Accession ML17102B737). On December 14, 2017 (ADAMS Accession ML17348A383), the licensee requested to remove Option 2 above, and committed to complete Option 1 by June 25, 2018. The licensee entered its commitment into the corrective action program as Condition Report 2017-00842. By letter dated July 24, 2018 (ADAMS Accession ML18205A090), the licensee informed the NRC that the commitment actions and the associated condition report had been closed with documentation supporting the closure of those actions.

On March 6, 2018, the NRC issued License Amendment No. 297 for the Permanently Defueled Technical Specifications (PDTs) (ADAMS Accession ML18010A087). The license amendment

establishes a licensing and safety basis that reflects the permanently shut down and defueled condition of the facility. In general, the amendment eliminated the requirements for operation MODES and MODES where fuel was emplaced in the reactor vessel.

On December 12, 2017, the NRC granted an exemption to OPPD from certain emergency planning requirements in 10 CFR 50.47, "Emergency Plans," and Appendix E, "Emergency Planning and Preparedness for Production and Utilization Facilities," to 10 CFR Part 50 (ADAMS Accession ML17276B286). This exemption allows OPPD to discontinue off-site radiological emergency planning activities and reduce the scope of its on-site emergency planning at the FCS, to be effective no sooner than April 7, 2018. On April 9, 2018, the licensee implemented its NRC approved Permanently Defueled Emergency Plan.

The NRC received two requests for approval of partial site releases from OPPD, by letters dated June 29, 2018 (ADAMS Accession ML18215A187) and November 12, 2018 (ADAMS Accession ML18316A036). The requests seek approval for release for unrestricted use of a portion of the FCS site. On November 28, 2018, the NRC conducted a public meeting to discuss OPPD's request for approval of the partial site release (ADAMS Accession ML19003A117). The NRC is currently reviewing the requests, and will determine whether OPPD has adequately evaluated the effect of releasing the properties per 10 CFR 50.83(a)(1) requirements.

## **1 Decommissioning Performance and Status Review at Permanently Shutdown Reactors (71801)**

### **1.1 Inspection Scope**

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Status of ongoing decommissioning activities and planning for future activities;
- Operability and functionality of systems necessary for safe decommissioning were assessed through plant walkdowns, such as: radioactive effluent monitoring, spent fuel pool level and temperature control, and radiation protection monitors and alarms;
- Performed plant tours to assess field conditions and decommissioning activities; and
- Observed and assessed the status of facility housekeeping.

### **1.2 Observations and Findings**

The inspectors observed the weekly Senior Leadership Team meeting, which focused on the scheduled tasks necessary to eventually begin the DECON process. The licensee's presentations were detailed and management facilitated knowledgeable, wide ranging discussions in order to discern risk, schedule, resources, and how to improve process control and oversight.

The inspectors observed a Deconstruction Vision meeting. The meeting consisted of productive discussions between the project managers on how to effectively complete deconstruction at the station. The meeting focused on developing a plan for decontamination and deconstruction, using a building by building approach, but also

focusing on making sure regulatory requirements are upheld at all times. Finally, the licensee understood that the approach for deconstruction needs to be included in the upcoming changes to the PSDAR.

During this inspection a tour was conducted of the facility, including the control room and spent fuel pool. The inspectors observed the control room logs were maintained electronically and contained pertinent records of the facility operations and status. The mechanical systems that supported spent fuel pool safety had not undergone any changes since the last inspection. In the areas toured, the licensee had implemented radiation protection controls, including postings and labeling that were in compliance with regulatory and procedure requirements.

During the inspection week, on the night of January 16, 2019, there was a fire outside the protected area in an unoccupied Exclusion Area Opening (EAO) shack. Blair Fire Department responded to the site within 15 minutes and extinguished the fire. FCS entered AOP-6, "Fire Emergency," Revision 35, and followed the steps as required. FCS contacted the NRC Operations Center on January 16, 2019, per 10 CFR 50.72(b)(2) to report the event (NRC Event Number 53831). The cause of the fire was determined to be a malfunctioning heating element in a climate unit. The NRC inspectors reported to the EAO shack the following day, to observe the current condition of the EAO shack and to evaluate the steps taken by FCS in response to the event. The NRC inspectors determined that FCS followed its procedure as required and the reporting requirements of 10 CFR 50.72. There was no release of radioactive or hazardous material.

Through observations and discussions with staff, the inspectors determined that the licensee was appropriately controlling and conducting facility operations in a safe manner. General observations by the inspectors identified good housekeeping throughout the facility and radiological labels and postings were appropriate for the areas observed. Discussions with the staff indicated they were knowledgeable of their responsibilities, duties, and of current plant status. Safety was noted to be important to staff as observed by briefings and safety timeouts prior to conducting activities inside the plant.

### 1.3 Conclusion

The licensee was implementing the decommissioning activities in accordance with the regulations and license requirements. The inspectors determined that the licensee was adequately controlling decommissioning activities and radiological work areas at the facility.

## **2 Spent Fuel Pool Safety at Permanently Shutdown Reactors (60801)**

### 2.1 Inspection Scope

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Design, operational, and administrative measures are in place to prevent a substantial reduction in Spent Fuel Pool (SFP) coolant inventory under normal and accident conditions;

- SFP instrumentation, alarms, and leakage detection systems are adequate to assure safe wet storage of spent fuel;
- SFP water chemistry and cleanliness control programs maintain water purity standards, limits on radionuclide concentration, and minimum boron concentration in accordance with the technical specification requirements;
- Criticality controls are consistent with the applicable nuclear criticality safety analyses;
- Procedures, drawings, and PSDAR descriptions and operations regarding the SFP operation and power supplies are adequate; and
- Problem identification issues related to SFP activities are entered into the corrective action program at an appropriate threshold.

## 2.2 Observations and Findings

The PDTs, Section 2.8.3, requires the SFP water level be maintained greater than or equal to 23 feet over the top of the irradiated fuel assemblies stored in the SFP and the SFP boron concentration to be greater or equal to 500 parts per million (ppm). The NRC inspectors reviewed the SFP level operational logs and reviewed chemistry data for the period since the last inspection. The inspectors concluded that the SFP level remained relatively steady at 41 feet, which is roughly 28 feet above the top of irradiated fuel, for the monitoring periods reviewed. The boron concentration in the SFP was 2646 ppm, which sufficiently met the refueling operational requirements in the PDTs, as stated above.

The SFP temperature was procedurally required to be maintained between 45 and 100 degrees Fahrenheit (°F). The temperature was tracked in the control room, where alarm panel annunciators were set to alert operators if SFP temperatures exceeded 120°F or fell below 50°F. The SFP temperature was approximately 90°F at the time of the inspection.

During the tour of the SFP building, the inspectors observed the licensee actively adding water to the SFP due to the humidity which caused the water level to lower. The licensee had the appropriate radiological controls in place while the pool was being filled. The certified fuel handler was always monitoring the SFP by the way of a monitor in the control room. The licensee was also continuing to monitor the leaks from the SFP to the liner and subsequently to the drain lines. The licensee monitored the leak rate monthly and calculated the approximate leak rate at 1.5 quarts per day (total for both SFP and fuel transfer canal). All leakage was contained and had not impacted the external environment.

## 2.3 Conclusion

The licensee's SFP was being maintained in accordance with PDTs and procedural requirements. The licensee was safely storing the spent fuel assemblies contained in the SFP.



### **3 Organization, Management, and Cost Controls at Permanently Shutdown Reactors (36801)**

#### **3.1 Inspection Scope**

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Evaluate methods the licensee resolves employee/safety concern and provides information to the employees;
- Regulatory requirements are properly implemented with respect to the site organization, staffing, and staff qualifications;
- Licensee appropriately implements the technical specifications and PSDAR; and
- Licensee decommissioning activities are initiated, sequenced, performed, and completed in a manner that is reasonably consistent with docketed planning and scheduling information.

#### **3.2 Observations and Findings**

The overall organizational structure at FCS was described in Section 5.2 of the PDTS. The inspectors verified that the licensee maintained an overall organizational structure to support decommissioning activities and meet the minimum staffing requirements to perform activities specified in PDTS and the PSDAR. The licensee continued to manage and implement several oversight and review committees that established and maintained effective oversight of decommissioning activities. The licensee performed benchmarking with other decommissioning facilities and reviewed and evaluated regulatory information to help inform its decommissioning processes.

Discussions were held with licensee management on the intended changes of the plant from SAFSTOR to DECON. The licensee informed the inspectors they are taking the necessary steps to make the transition once a contractor to assist with decontamination and deconstruction had been announced. In the meantime, the licensee is continuing to work on the cross-qualifications of personnel and training. The licensee informed the inspectors of the importance they were placing on cross-qualification of personnel as staffing was reduced in different areas due to retirements and attrition, in order to safely support the changes from SAFSTOR to DECON.

The licensee continued to implement its employee concerns and safety conscious work environment programs, in which workers felt free to raise concerns to either the licensee or the NRC without fear of retaliation. The inspectors reviewed Licensee Procedure EI-FC-101, "Employee Concerns Program," Revision 2, which provided a confidential avenue for individuals to report concerns, within a safety conscious work environment. The inspectors completed a detailed review of the safety conscious work environment, in which they interviewed 27 front-line security officers randomly selected from each of the four crews. These interviews were designed to gain insights into the health of the safety conscious work environment within the security organization and the effectiveness of the corrective action process. The inspectors also reviewed a

listing of concerns documented in the corrective action program by security individuals since January 2018 and interviewed the employee concerns program manager.

All security officers interviewed indicated that they felt free to raise safety concerns and did not fear retaliation for having done so. As is typical with other security organizations, many of the security officers at FCS responded to the inspector's questions with examples of concerns that had been raised associated with environment (habitability) issues (heating, ventilation, air-conditioning, or industrial safety) and since the site was experiencing wintry weather conditions, examples associated with icy walkways, muddy paths, or potholes. All officers interviewed indicated that they would raise these types of concerns and that they generally would take care of the situation (spread ice melt, etc.) themselves or that they would contact their shift supervisor if the situation required outside assistance (typically by someone in maintenance). When asked, all of the officers interviewed acknowledged that these examples did not impact the ability to implement security plan requirements.

All officers interviewed indicated that they had numerous ways available to them in which they could raise safety concerns. Most typically, they identified issues to their shift supervisor or to an officer stationed in the central alarm station. All officers interviewed stated that could document safety concerns in a condition report but most acknowledged that they did so infrequently and that in general, if the issue required a condition report it was written by the shift supervisor. All officers interviewed believed that equipment and resources that were required by the security plan were being appropriately maintained and that the corrective action program addressed these issues in a timely manner consistent with the condition's safety significance. Regarding the habitability issues, most officers were generally satisfied with the responses but some wished that they received a higher priority. The officers interviewed indicated that the feedback they received regarding resolution of their concerns was mixed and could be improved. The inspectors noted that over 300 condition reports had been initiated by security personnel since January 2018 and concluded that this indicated a willingness to use the corrective action program to address security-related deficiencies.

Based on the interviews conducted, the inspectors found that the licensee had established and has maintained a safety conscious work environment in which security officers felt free to raise safety concerns without fear of retaliation, and where they believed that those issues which potentially impacted requirements under the Atomic Energy Act or Energy Reorganization Act were being appropriately addressed.

### 3.3 Conclusions

The licensee maintained an overall organizational structure to support decommissioning activities as required by the PDTs and PSDAR. The licensee was implementing its employee concerns and safety conscious work environment programs in which individuals could raise concerns without fear of retaliation.

## **4 Solid Radioactive Waste Management and Transportation of Radioactive Materials (86750)**

### **4.1 Inspection Scope**

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Whether the licensee provided detailed instructions and operating procedures for transfer, packaging, and transport of low-level radioactive waste;
- Whether the material was properly classified, described, packaged, marked, and labeled for transportation;
- Whether the licensee used updated and audited procedures when scaling factors or correlation factors are used to quantify the concentration of hard-to-detect radionuclides; and
- Whether shipments made by the licensee were in compliance with NRC and U.S. Department of Transportation (DOT) regulations.

### **4.2 Observations and Findings**

The inspectors reviewed the licensee's radioactive waste shipment log, which documented ten shipments from June to December of 2018. All of these shipments were sent to a waste processor, and not directly to a waste burial site. The inspectors selected one shipment from the log to review for compliance with the regulations under 10 CFR 71.5, "Transportation of Licensed Material," and the licensee's procedures. This was shipment number 18-30, which included several legacy filters the licensee had removed from the spent fuel pool, characterized, and packaged in a liner for shipment to a waste processor. Inspectors discussed the characterization of the filters with the licensee, including how filter dose rates were measured, how the waste stream analysis was performed, and how appropriate scaling factors were applied for hard-to-detect radionuclides. Through these discussions and a review of pertinent records, the inspectors concluded that the filters were characterized and packaged appropriately, and the shipping papers were generated in accordance with NRC and DOT requirements and licensee procedures.

In addition to the ten shipments documented in the licensee's waste shipment log, the licensee also had prepared and shipped a large component from their storage mausoleum (old pressurizer) in the time period since the last inspection. For this shipment, the licensee used a contractor (Energy Solutions, Inc.) to prepare, package, and transport the pressurizer for burial. The inspectors reviewed the shipping paperwork associated with the pressurizer shipment, and held discussions with both the licensee and Energy Solutions staff. Through these discussions and reviews, the inspectors determined that the pressurizer was characterized and packaged in accordance with NRC and DOT requirements, and was appropriately classified as required by 10 CFR Part 61.

During the inspection, the inspectors had the opportunity to observe two additional packages being prepared for shipment. These included a Type A package containing multiple radioactive sources and the old Reactor Pressure Vessel Head (RPVH) that Energy Solutions was preparing for shipment to a waste burial site. For both of these shipments, the inspectors reviewed records associated with characterization and classification of the material being shipped.

The inspectors observed the licensee perform final marking and labeling of the Type A package, as well as the required radiation surveys. Inspectors conducted radiation surveys of the package, and discussed shipment of the Type A package with the driver and the licensee's qualified shipping staff. For the shipment containing the RPVH, the inspectors observed the radiation safety controls in the area where staff were preparing the RPVH for packaging and transport, and conducted confirmatory dose rate surveys. The inspectors also interviewed licensee and Energy Solutions staff to discuss modifications to the RPVH that were necessary to redistribute its weight within the shipping container. Through all of the field observations and interviews that were conducted during the inspection, it was determined that the two additional packages being prepared for shipment were characterized and packaged in accordance with regulatory requirements and site procedures. The inspectors conducted the confirmatory surveys with a RadEye, Serial No. 13420 and a calibration due date of November 9, 2019.

The licensee had multiple individuals qualified in accordance with the requirements under 49 CFR Part 172 Subpart H. For all licensee staff involved in packaging preparation and transport, the inspectors verified that these staff had received the proper training, and that the training was appropriately documented in the training records.

The licensee had not completed any self-assessments or audits of the radioactive waste and transportation programs since the last inspection. However, the licensee was planning a Management Directed Assessment of the radioactive waste program (NOSMDA-FC-18-04), and the inspectors reviewed the plan for this assessment. There were no open items from previous audits that were performed in the radioactive waste and transportation programs.

#### 4.3 Conclusions

The licensee was packaging and shipping radioactive wastes in accordance with regulatory requirements and with the appropriate documentation and shipping papers.

### 5 **Exit Meeting Summary**

On January 17, 2019, the NRC inspectors presented the final inspection results to Ms. Mary J. Fisher, Vice President, Energy Production and Nuclear Decommissioning, and other members of the licensee's staff. Within the scope of the inspection, no violations were identified. No proprietary information was identified with the exception of certain budgeting documents, which were not retained by the inspectors.

## **SUPPLEMENTARY INFORMATION**

### **KEY POINTS OF CONTACT**

#### **Licensee Personnel**

T. Uehling, Senior Director, Fort Calhoun Station Decommissioning  
T. Maine, Plant Manager  
D. Whisler, Manager Radiation Protection and Chemistry  
B. Pearson, Radiation Protection Supervisor  
A. Dudas, Radiation Waste Specialist  
J. McBride, Senior Auditor, NOS  
B. Blome, Director, License and Regulatory Affairs  
C. Cameron, Principal Regulatory Specialist

### **INSPECTION PROCEDURES USED**

IP 71801	Decommissioning Performance and Status Review at Permanently Shutdown Reactors
IP 60801	Spent Fuel Pool Safety at Permanently Shutdown Reactors
IP 36801	Organization, Management, and Cost Controls at Permanently Shutdown Reactors
IP 86750	Solid Radioactive Waste Management and Transportation of Radioactive Materials

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

#### **Opened/Closed**

None

#### **Discussed**

None

### **LIST OF ACRONYMS**

ADAMS	Agencywide Documents Access and Management System
CFR	<i>Code of Federal Regulations</i>
DOT	U.S. Department of Transportation
EAO	Exclusion Area Opening
FCS	Fort Calhoun Station
NRC	Nuclear Regulatory Commission
OPPD	Omaha Public Power District
PDTS	Permanently Defueled Technical Specifications
PSDAR	Post-Shutdown Decommissioning Activities Report
RPVH	Reactor Pressure Vessel Head
SFP	Spent Fuel Pool

FORT CALHOUN STATION – NRC INSPECTION REPORT 050-00285/2019-001 - DATED  
FEBRUARY 12, 2019

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