

INSPECTION FINDINGS AND LICENSEE ACKNOWLEDGMENT

1. LICENSEE Kerr-McGee Corporation Kerr-McGee Building Oklahoma City, Oklahoma 73102		2. REGIONAL OFFICE U. S. ATOMIC ENERGY COMMISSION REGION IV, DIVISION OF COMPLIANCE 10395 W. COLFAX, ROOM 200 DENVER, COLORADO 80215	
3. DOCKET NUMBER(S) 40-8027	4. LICENSE NUMBER(S) SUB-1010	5. DATE OF INSPECTION September 20, 21, & 22, 1971	
6. INSPECTION FINDINGS The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Commission's rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The findings as a result of this inspection are as follows: <input checked="" type="checkbox"/> No items of noncompliance or unsafe conditions were found. The following items of noncompliance related to records, signs, and labels were found: <input type="checkbox"/> A. Rooms or areas were not properly posted to indicate the presence of a RADIATION AREA. 10 CFR 20.203(b) or 34.42 <input type="checkbox"/> B. Rooms or areas were not properly posted to indicate the presence of a HIGH RADIATION AREA. 10 CFR 20.203(c) (1) or 34.42 <input type="checkbox"/> C. Rooms or areas were not properly posted to indicate the presence of an AIRBORNE RADIOACTIVITY AREA. 10 CFR 20.203(d) <input type="checkbox"/> D. Rooms or areas were not properly posted to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(e) <input type="checkbox"/> E. Containers were not properly labeled to indicate the presence of RADIOACTIVE MATERIAL. 10 CFR 20.203(f) (1) or (f) (2) <input type="checkbox"/> F. A current copy of 10 CFR 20, a copy of the license, or a copy of the operating procedures was not properly posted or made available. 10 CFR 20.206(b) <input type="checkbox"/> G. Form AEC-3 was not properly posted. 10 CFR 20.206(c) <input type="checkbox"/> H. Records of the radiation exposure of individuals were not properly maintained. 10 CFR 20.401(a) or 34.33(b) <input type="checkbox"/> I. Records of surveys or disposals were not properly maintained. 10 CFR 20.401(b) or 34.43(d) <input type="checkbox"/> J. Records of receipt, transfer, disposal, export or inventory of licensed material were not properly maintained. 10 CFR 30.51, 40.61 or 70.51 <input type="checkbox"/> K. Records of leak tests were not maintained as prescribed in your license, or 10 CFR 34.25(c) <input type="checkbox"/> L. Records of inventories were not maintained. 10 CFR 34.26 <input type="checkbox"/> M. Utilization logs were not maintained. 10 CFR 34.27 <input type="checkbox"/> N. Records of radiation survey instrument calibration were not maintained. 10 CFR 34.24 <input type="checkbox"/> O. Records of teletherapy electrical interlock tests were not maintained as prescribed in your license. <input type="checkbox"/> P. Other _____ _____ (AEC Compliance Inspector) 7. The AEC Compliance Inspector has explained and I understand the items of noncompliance listed above. The items of noncompliance will be corrected within the next 30 days. 8507310328 850530 PDR FOIA BURR85-229 PDR _____ (Date) _____ (Licensee Representative - Title or Position)			

ORIGINAL TO LICENSEE

File

FORM REC 788 (7-71) PI 120018		U.S. ATOMIC ENERGY COMMISSION COMPLIANCE STATISTICAL DATA							
A. DOCKET NUMBER 04008027		B. REPORT NUMBER 7101		C. PRIORITY/CATEGORY 2 I		D. INQ/INSPECTION/INVESTIGATION DATES FROM 09-20-71 TO 09-22-71		E. REGION CONDUCTING ACTIVITY 4	
LICENSEE/VENDOR Kerr-McGee Corporation				FACILITY Oklahoma City, Oklahoma			LICENSE NUMBER SUB-1010		
G. ACTIVITY CONDUCTED: 1 <input checked="" type="checkbox"/> INSPECTION 2 <input type="checkbox"/> INQUIRY 3 <input type="checkbox"/> INVESTIGATION 4 <input type="checkbox"/> VENDOR INSPECTION 5 <input type="checkbox"/> MANAGEMENT VISIT 6 <input type="checkbox"/> INQUIRY-NON LICENSEE									
H. INSPECTION/INVESTIGATION RESULTS: 1 <input checked="" type="checkbox"/> SSI 2 <input type="checkbox"/> REGIONAL OFFICE LETTER 3 <input type="checkbox"/> REFERRED TO HQS FOR ACTION									
I. INSPECTION/INVESTIGATION FINDINGS: 1 <input checked="" type="checkbox"/> CLEAR 2 <input type="checkbox"/> SAFETY ITEM 3 <input type="checkbox"/> NONCOMPLIANCE 4 <input type="checkbox"/> NONCONFORMANCE									
J. FIELD ACTION AS A RESULT OF INQUIRY: 1 <input type="checkbox"/> CONDUCT INVESTIGATION 2 <input type="checkbox"/> REVIEW NEXT INSPECTION 3 <input type="checkbox"/> REFER TO OTHER REGION 4 <input type="checkbox"/> REFER TO NON-REG. AUTH. 5 <input type="checkbox"/> REFER TO OTHER REG. OFFICE 6 <input type="checkbox"/> HQS FOR ACTION 7 <input type="checkbox"/> NO FURTHER ACTION									
L. REASON INSP. FINDINGS REFERRED TO HEADQUARTERS FOR ACTION:			M. SUBJECT OF INQUIRY OR INVESTIGATION:				N. HEADQUARTERS ACTION ON INSPECTION AND INVESTIGATION		
01 <input type="checkbox"/> IMMEDIATE THREAT TO HEALTH AND SAFETY			01 <input type="checkbox"/> TYPE A INT. OVEREXPOSURE				01 <input type="checkbox"/> NO ACTION REQUIRED		
02 <input type="checkbox"/> COMPLEX ITEM INVOLVING: 02 <input type="checkbox"/> NONCOMPLIANCE/NONCONFORMANCE 03 <input type="checkbox"/> LICENSING PROBLEM 04 <input type="checkbox"/> POLICY MATTER 05 <input type="checkbox"/> INTERPRETATION			02 <input type="checkbox"/> TYPE A EXT. OVEREXPOSURE				02 <input type="checkbox"/> LETTER-CLEAR		
06 <input type="checkbox"/> SAFETY ITEM			03 <input type="checkbox"/> TYPE A RELEASE				03 <input type="checkbox"/> LETTER-NONCOMPLIANCE		
07 <input type="checkbox"/> MANAGEMENT DEFICIENCY			04 <input type="checkbox"/> TYPE A LOSS OF FACILITY				04 <input type="checkbox"/> LETTER-SAFETY ITEM		
08 <input type="checkbox"/> INADEQ. REPLY TO LETTER			05 <input type="checkbox"/> TYPE A PROPERTY DAMAGE				05 <input type="checkbox"/> PART 2 NOTICE		
09 <input type="checkbox"/> NO REPLY TO LETTER			06 <input type="checkbox"/> TYPE B INT. OVEREXPOSURE				06 <input type="checkbox"/> PART 2 NOTICE AS RESULT OF FOLLOWUP TO REGIONAL OFFICE LETTER		
10 <input type="checkbox"/> NO CORRECTIVE ACTION PLANNED			07 <input type="checkbox"/> TYPE B EXT. OVEREXPOSURE				07 <input type="checkbox"/> ORDER		
11 <input type="checkbox"/> INADEQUATE CORRECTIVE ACTION PLANNED			08 <input type="checkbox"/> TYPE B RELEASE				08 <input type="checkbox"/> REFER TO DRL FOR RESOLUTION		
12 <input type="checkbox"/> HQS LETTER REQUIRED			09 <input type="checkbox"/> TYPE B LOSS OF FACILITY				09 <input type="checkbox"/> REFER TO DRL FOR INFORMATION		
13 <input type="checkbox"/> HQS REVIEW REQUIRED			10 <input type="checkbox"/> TYPE B PROPERTY DAMAGE				10 <input type="checkbox"/> REFER TO DML FOR RESOLUTION		
14 <input type="checkbox"/> UNREVIEWED SAFETY MATTER			11 <input type="checkbox"/> INTERNAL OVEREXPOSURE				11 <input type="checkbox"/> REFER TO DML FOR INFORMATION		
15 <input type="checkbox"/> DESIGN CHANGE			12 <input type="checkbox"/> EXTERNAL OVEREXPOSURE				12 <input type="checkbox"/> REFER TO REGION TO CLOSE OUT		
16 <input type="checkbox"/> OTHER			13 <input type="checkbox"/> EXCESSIVE RADIATION LEVELS				13 <input type="checkbox"/> OTHER		
17 <input type="checkbox"/>			14 <input type="checkbox"/> EXCESSIVE CONCENTRATION LEVELS				DATE LETTER, NOTICE, ORDER ISSUED		
18 <input type="checkbox"/>			15 <input type="checkbox"/> CRITICALITY				DATE LICENSEE REPLY RECEIVED		
19 <input type="checkbox"/>			16 <input type="checkbox"/> LOSS OR THEFT				REPLY NOT REQUIRED		
20 <input type="checkbox"/>			17 <input type="checkbox"/> CONTAMINATION						
21 <input type="checkbox"/>			18 <input type="checkbox"/> UNSAFE OPERATION						
22 <input type="checkbox"/>			19 <input type="checkbox"/> FIRE, EXPLOSION						
23 <input type="checkbox"/>			20 <input type="checkbox"/> HUMAN (OPERATOR) ERROR						
24 <input type="checkbox"/>			21 <input type="checkbox"/> COMPLAINT						
25 <input type="checkbox"/>			22 <input type="checkbox"/> PUBLIC INTEREST						
26 <input type="checkbox"/>			23 <input type="checkbox"/> LEAKING SOURCE						
27 <input type="checkbox"/>			24 <input type="checkbox"/> TRANSPORTATION						
28 <input type="checkbox"/>			25 <input type="checkbox"/> EXPIRED LICENSE EXPOSURE REPORTED AND FOUND INVALID.						
29 <input type="checkbox"/>			26 <input type="checkbox"/> CONSTRUCTION/EQUIP. DEFICIENCY						
30 <input type="checkbox"/>			27 <input type="checkbox"/> EQUIPMENT FAILURE						
31 <input type="checkbox"/>			28 <input type="checkbox"/> EXCEED LIC/TECH SPEC REQ'S						
32 <input type="checkbox"/>			29 <input type="checkbox"/> DEPARTURE FROM PSAR/TS'S						
33 <input type="checkbox"/>			30 <input type="checkbox"/> OTHER						
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