UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
SAM NUNN ATLANTA FEDERAL CENTER
61 FORSYTH STREET SW SUITE 23T85
ATLANTA, GEORGIA 30303-8931

January 11, 2002

Tennessee Valley Authority
ATTN: Mr. J. A. Scalice
Chief Nuclear Officer and
Executive Vice President
6A Lookout Place
1101 Market Street
Chattanooga, TN 37402-2801

SUBJECT: SEQUOYAH NUCLEAR PLANT - NRC INSPECTION REPORT NOS. 50-327/01-06 AND 50-328/01-06

Dear Mr. Scalice:

On December 14, 2001, the NRC completed an inspection at your Sequoyah 1 and 2 reactor facilities. The enclosed report presents the findings of this inspection which were discussed on December 14, 2001, with Mr. Ed Freeman and other members of your staff.

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

On the basis of the sample selected for review, there were no findings of significance identified during this inspection. The inspectors concluded that problems were properly identified, evaluated and resolved within the problem identification and resolution programs.

In accordance with 10 CFR 2.790 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at http://www.nrc.gov/NRC/ADAMS.index.html (the Public Electronic Reading Room).

Should you have any questions concerning this letter, please contact me at 404-562-4530.

Sincerely,

/RA/

Paul E. Fredrickson, Chief
Reactor Projects Branch 6
Division of Reactor Projects

Docket Nos. 50-327, 50-328
License Nos. DPR-77, DPR-79

Enclosure: NRC Inspection Report 50-327/01-06; 328/01-06
w/Attachment

cc w/encl: (See page 3)

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U.S. NUCLEAR REGULATORY COMMISSION

REGION II

Docket Nos:	50-327, 50-328
License Nos:	DPR-77, DPR-79
Report No:	50-327/01-06, 50-328/01-06
Licensee:	Tennessee Valley Authority (TVA)
Facility:	Sequoyah Nuclear Plant, Units 1 & 2
Location:	Sequoyah Access Road Hamilton County, TN 37379
Dates:	December 3, 2001 through December 14, 2001
Inspectors:	R. Nease, Lead Inspector, Senior Reactor Inspector, Region IV R. Gibbs, Senior Resident Inspector, Sequoyah Nuclear Plant S. Schwind, Resident Inspector, Comanche Peak Steam Electric Station
Approved by:	P. Fredrickson, Chief Reactor Projects Branch 6 Division of Reactor Projects

Enclosure

Summary of Findings

Adams Template:

IR 05000327-01-06, IR 05000328-01-06, on 12/03-14/2001, Tennessee Valley Authority, Sequoyah Nuclear Plant, Units 1 & 2, annual baseline inspection of the identification and resolution of problems.

The inspection was conducted by an NRC Region IV Senior Reactor Inspector, the Sequoyah Senior Resident Inspector, and the NRC Region IV Comanche Peak Steam Electric Station Resident Inspector. One finding of very low safety significance (Green) was identified by the licensee and was classified as a non-cited violation. The significance of the finding is indicated by its color (green, white, yellow, red) and was determined by the Significance Determination Process in Inspection Manual Chapter 0609.

Identification and Resolution of Problems

The inspectors determined that the licensee identified, evaluated, prioritized, and corrected problems in a timely and effective manner, consistent with risk and safety significance. Corrective actions were generally implemented in a timely manner, and were appropriate to prevent recurrence. Senior management involvement in the problem identification and resolution program was evident in the daily management review committee meeting, where all problem identification reports were reviewed. Licensee audits and assessments critically assessed the licensee's problem identification and resolution activity and identified improvement needs. Based on interviews conducted during the inspection, workers at the site felt free to raise issues with their management and to input them into the problem identification and resolution program.

A non-cited violation of very low safety significance, which had been identified by the licensee was reviewed by the inspectors. Corrective actions taken or planned by the licensee were reasonable. This non-cited violation is listed in Section 4OA7 of this report.

Report Details

4. OTHER ACTIVITIES (OA)

4OA2 Problems Identification and Resolution

a. Effectiveness of Problem Identification

(1) Inspection Scope

To determine if problems were being properly identified, characterized, and entered into the corrective action program for evaluation and resolution, the inspectors reviewed problem evaluation reports (PERs) and work orders (WOs) associated with certain selected systems components and equipment. In selecting the PERs and WOs for review, the inspectors considered systems from the licensee's listings of top ten risk reduction worth systems and top ten risk achievement worth systems; systems identified for additional attention in the licensee's system health program; and components and equipment important in mitigating accident conditions identified in the Sequoyah Significance Determination Worksheets. During the inspection, the inspectors reviewed a total of approximately 120 PERs and WOs issued between December 2000 and December 2001 associated with the following systems and equipment.

- Unit 1 auxiliary feedwater (AFW) system,
- Unit 1 residual heat removal (RHR) system,
- Emergency diesel generators (EDGs),
- Safety-related chillers and heating ventilating and air conditioning (HVAC) for the 6.9 kV and 480 V switchgear, main control, and electric board rooms
- Main steam isolation valves (MSIVs),
- Main steam (MS) power operated relief valves (PORVs),
- Pressurizer PORVs,
- MS dump valves, and
- Safety injection (SI) accumulator discharge check valves.

The inspectors reviewed personnel contamination reports, safeguards event reports, and licensee identified deficiencies associated with emergency preparedness to verify that they were appropriately entered into the licensee's problem identification and resolution program in accordance with Procedure SPP-3.1, Corrective Action Program. In addition, PERs associated with the security, radiation protection, and emergency preparedness cornerstones were reviewed.

The inspectors reviewed self-assessments and quality assurance audit reports in order to assess the threshold for identification of problems and determine if the licensee was self-critical when examining its programs. The inspectors also verified that assessment and audit findings were entered into the corrective action program and tracked though final resolution. In addition, the results of the licensee's process for evaluating operating experience items and non-cited violations (NCVs) from NRC inspection reports were reviewed for inclusion in the licensee's problem identification and resolution program.

The inspectors reviewed corrective action documents (such as PERs, WOs, audit findings, etc.) to verify that significant negative trends associated with human or equipment performance were being identified and entered into the licensee's corrective action program.

Specific documents reviewed are listed in the attachment to this report.

(2) Issues and Findings

The inspectors determined that the licensee was effective at identifying problems and entering them into the corrective action program. This was evidenced by the relatively few deficiencies identified by external organizations (including the NRC) that had not been previously identified by the licensee during the review period.

Operating experience reviews were given appropriate consideration by the Sequoyah staff. This was exemplified by the diesel generator system engineer's review of the EDG exhaust corrosion issue, which had been initially considered by the licensee's corporate staff as not applicable. The system engineer inspected the EDGs, found corrosion in the EDG exhaust piping, and initiated a PER. Although this issue did not present an operability concern, if ignored, it could have affected operability in the future.

The licensee frequently conducted self-assessments, and those reviewed by the inspectors were self-critical with an appropriate threshold for identifying issues. Of particular note was the licensee's self-assessment of the site self-assessment program and the self-assessment of the risk of online maintenance. Licensee audits were of good depth and identified issues similar to those that were self-revealing or raised during previous NRC inspections. Findings and recommendations from self-assessments, audits, and the offsite review committee; issues identified through operating experience; and NCVs from NRC inspection reports were appropriately entered into the licensee's problem identification and resolution program. Issues identified in personnel contamination reports and licensee identified emergency preparedness deficiencies were also appropriately entered into the licensee's problem identification and resolution program. The inspectors did not identify any instances where conditions adverse to quality were not documented as PERs in accordance with Procedure SPP-3.1.

The inspectors found the licensee to be aggressive in trending of human performance problems, as evidenced by their Excellence in Performance Program, which was initiated to address the number of human performance errors documented in PERs, self-assessments and audits. Although this program had not yet been fully implemented, efforts taken to date were pro-active in addressing human performance errors. For instance, the licensee recently introduced periodic computer-based self-evaluation testing of human performance issues, the results of which are reviewed to identify areas of weakness. The inspectors noted that several human performance issues had occurred in the security area and in the procedure revision process. These human errors were appropriately identified and addressed in the corrective action program.

During interviews with various levels of plant personnel the inspectors found that personnel had received feedback on problems they had identified as well as on self-assessment and audit findings.

b. Prioritization and Evaluation of Issues

(1) Inspection Scope

Approximately 120 PERs and WO's were reviewed to determine if the issues were appropriately prioritized and if the problem evaluation identified and considered the full extent of conditions, generic implications, common causes, and previous occurrences. The inspectors reviewed the selected PERs for agreement with the classification level (Levels A, B, C, and D descriptions in Procedure SPP-3.1) and attended the licensee's management review committee (MRC) meeting to observe the final classification assignment for emerging PERs. The inspectors also evaluated the licensee's performance in assessing apparent cause and performing operability determinations as required. In addition, the inspectors reviewed licensee audits and self-assessments for observations concerning prioritization and evaluation of issues.

Specific documents reviewed are listed in the attachment to this report.

(2) Issues and Findings

Based on a review of the licensee's records, the inspectors found that the licensee appropriately prioritized and evaluated issues. Root cause determinations required by procedure to be performed for the higher priority PERs (Levels A and B) were thorough and of sufficient depth. The inspectors identified no specific findings relating to prioritization, evaluation of issues, and cause determinations.

c. Effectiveness of Corrective Actions

(1) Inspection Scope

The inspectors reviewed the selected PERs, WOs, licensee audits, and self-assessments to evaluate the effectiveness of corrective actions, and to determine if the timeliness met the licensee's problem identification and resolution requirements, including corrective actions to address common cause or generic concerns. The PERs selected included the system PERs and WOs discussed previously, as well as a selection of human performance PERs attributed to operations, engineering, and maintenance personnel. The inspectors also reviewed the corrective actions associated with five PERs written as a result of NCVs documented in NRC inspection reports between December 2000 and December 2001. In addition, the inspectors reviewed PER trending reports to determine if the licensee was recognizing and addressing adverse trends. Plant personnel were interviewed to independently verify and assess the effectiveness of corrective actions implemented by the licensee.

Specific documents reviewed are listed in the attachment to this report.

(2) Issues and Findings

Based on the sample of PERs selected for review, the inspectors determined that for the most part, the licensee's corrective actions on significant issues was effective; however, the inspectors noted one licensee identified NCV, and identified an unresolved issue, both of which are discussed below.

Safety Related Chiller Problems

The inspectors reviewed the licensee's problem identification and associated corrective actions related to several safety related heating and ventilation system chillers that had experienced performance problems for several years. Chiller issues for the following plant areas were reviewed; (1) 6.9 KV shutdown board rooms; (2) 480 V board rooms; (3) electric board rooms; and (4) main control room. These chillers had been in Maintenance Rule a(1) status in the licensee's program since the program was implemented in 1996. A high number of functional failures and high unavailability had resulted in the chillers exceeding their established performance criteria. Since 1996, the licensee had initiated numerous PERs for these performance problems. Although the licensee had previously identified these issues as needing corrective action, the licensee's actions were not effective or timely, and performance problems continued to occur. The licensee determined that from 1997 through 1999 approximately 63 functional failures had occurred with 21 PERs initiated. In December 2000, the licensee initiated Level B PER 00-011349-000 to address these continuing performance problems. The purpose of the PER was to better identify and resolve longstanding chiller problems to improve their performance thus making the chillers more reliable and available. The inspectors reviewed PER 00-011349-000 and its associated corrective actions, discussed the corrective action plan with engineering personnel and reviewed trend information used for tracking chiller performance. Based on this review, the inspectors concluded that the licensee's corrective action plans were reasonable with regard to improving chiller performance. Although corrective actions were not complete at the time of the inspection, the inspectors concluded that the licensee had made reasonable progress since the PER was initiated. The licensee's self-recognized failure to correct chiller performance problems in a timely and effective manner had a credible impact on safety, because these systems provide cooling air for numerous safety significant electrical switchgear, control cabinets in the main control room, and instrument panels in the electric board room areas. Because the cooling function of the chillers had not been lost, the impact of the licensee's failure to correct chiller performance problems was of very low safety significance (Green). The failure to achieve timely and effective corrective actions concerning safety chiller performance is identified as a violation of 10 CFR Part 50, Appendix B, Criterion XVI, Corrective Action. The enforcement aspects of this finding are addressed in Section 4OA7.

Gas Accumulation in the RHR Pump Discharge Piping

The inspectors examined corrective actions for a long standing problem with gas accumulation in the Unit 1 RHR system piping downstream of the RHR pumps due to leakage through SI accumulators and test header valves. In particular, the following corrective actions were reviewed:

- A licensee identified NCV (50-327/0008-03) of 10 CFR Part 50, Appendix B, Criterion XVI issued in NRC Inspection Report 50-327,328/00-08 on March 31, 2001, for inadequate corrective actions in addressing a 1995 water hammer event which failed to preclude lifting a relief valve in 2000.

- A licensee identified NCV (50-327/0007-02) of 10 CFR Part 50, Appendix B, Criterion XVI, issued in NRC Inspection Report 50-327,328/00-07 in February of 2000, for failure to identify and correct inadequacies in the venting procedure.

Corrective actions taken in response to these two NCVs included enhancements to the venting procedure, which increased the venting time from five minutes to ten minutes and required the pumps to be in operation during the venting. The licensee had previously determined that the integrity of the system, due to water hammer, would not be affected as long as the amount of gas in the system did not exceed 22 ft^3. The licensee also developed a method for measuring the amount of gas in the system. Corrective actions for these two NCVs were reasonable and were successful in reducing the amount of gas in the system. However, significant gas accumulation continued as evidenced by PER 01-006158-000 and PER 01-006149-000 which documented a measured gas accumulation of 15.8 ft^3 in July 2001, and 18.8 ft^3 in September 2001, respectively.

The inspectors had no immediate operability concerns with this issue; however, it was evident that gas continued to accumulate in the system despite the corrective actions. Based on this, the inspectors were concerned whether the method used for venting the RHR system would ensure the system was full of water. Paragraph 4.5.2 of the Sequoyah Nuclear Plant Technical Specifications states,

> "Each ECCS subsystem shall be demonstrated OPERABLE:
>
> b. At least once per 31 days by:
>
> 1. Verifying that the ECCS piping is full of water by venting the ECCS pump casings and the accessible discharge piping high points..."

It was not apparent to the inspectors that by venting for a fixed period of time, rather than by direct observation of vent piping discharge, all gas was vented from RHR system high points. Furthermore, there is some uncertainty that the point from where the venting occurs, is actually the high point for gas accumulation and, if it is a high point, is it the only accessible high point vent. In the recent Unit 1 refueling outage the licensee walked-down the RHR discharge piping to identify all the high points. At the time of this inspection, this data had not yet been analyzed.

In reviewing the methodology used in measuring gas accumulation in the RHR system, the inspectors noted that this process was not controlled by a quality-level procedure. In addition, the inspectors had questions regarding the accuracy of the method used by the licensee to measure gas accumulation, the basis for the calculated maximum value of

22 ft^3, and whether that maximum was, in fact, being used as a technical specification operability limit.

Pending the completion of the in-progress licensee analysis of the RHR system piping walk-down data, the making of any appropriate venting methodology changes, and subsequent NRC review of the timeliness and adequacy of corrective action, an Unresolved Item, 50-327/01-06-02, Residual Heat Removal System Venting Methodology, is identified.

d. Assessment of Safety-Conscious Work Environment

(1) Inspection Scope

The inspectors held discussions with members of the licensee's staff, which represented cross-sections of functional organizations and supervisory and non-supervisory personnel, to assess if a work environment conducive to the identification of issues existed. The inspectors also examined the concerns resolution program to determine if issues affecting nuclear safety were being appropriately addressed.

(2) Issues and Findings

The inspectors concluded, based on information collected from these interviews, that employees were willing to identify issues and accepted the responsibility to proactively identify and enter safety issues into the corrective action program. Individuals stated that they would not hesitate in raising nuclear safety issues to management. The inspectors identified no findings related to the safety conscious work environment.

4OA6 Meetings, Including Exit

The inspectors presented the inspection results to Mr. E. Freeman, Operations Manager, and other members of the licensee management and staff at the conclusion of the inspection on December 14, 2001. The licensee acknowledged the findings presented.

The lead inspector asked the licensee's management whether any materials examined during the inspection should be considered proprietary. No proprietary information was identified.

4OA7 Licensee Identified Violations

The following finding of very low significance (Green) was identified by the licensee and is a violation of NRC requirements which meets the criteria of Section VI of the NRC Enforcement Policy, NUREG-1600 for being dispositioned as an NCV.

The licensee was informed that if this NCV is denied, a response, with the basis for denial, should be provided, within 30 days of the date of this inspection report, to the U. S. Nuclear Regulatory Commission, Attn: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region II; the Director, Office of

Enforcement, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001; and the NRC Resident Inspector at the Sequoyah Nuclear Plant.

NCV Tracking Number	Requirement Licensee Failed to Meet
NCV 50-327, 328/01-06-01	10 CFR 50, Appendix B, Criterion XVI, Corrective Action, requires, in part, that in the case of significant conditions adverse to quality, measures shall assure that the cause of the condition is determined and corrective actions taken to preclude repetition. Contrary to the above, licensee actions from 1996 through 2000 to resolve longstanding problems with safety related heating and ventilation system chillers for plant areas including: (1) 6.9 KV shutdown board rooms; (2) 480 V board rooms; (3) electric board rooms; and (4) main control room were not timely and effective to prevent recurrence. The licensee identified this adverse condition and initiated PER 00-011349-000.

SUPPLEMENTAL INFORMATION

PARTIAL LIST OF PERSONS CONTACTED

J. Adams, System Engineering
J. Bible, Maintenance and Modifications Support Manager
C. Burrell, Nuclear Engineer
C. Carey, PSA Engineer
L. Clift, Self Assessment/Human Performance Manager
M. Cooper, NSSS Engineering Manager
D. Curtley, Maintenance Rule Program Coordinator
F. Cuzzort, System Engineer
E. Elam, System Engineering
H. Elliott, Maintenance
M. France, Security Field Support Supervisor
S. Frazier, Security System Engineer
J. Hamilton, Performance & Analysis Manager
E. Leonard, System Engineering
W. Ludwig, Industry Affairs Engineer
M. McNamer, Security Project Manager
J. Miller, Maintenance
F. Mills, Maintenance
R. Newby, Concerns Resolution Manager
D. Porter, Procedure Writer
F. Roddy, Procedure Writer
J. Smith, Licensing Supervisor
K. Stevens, Site Security Manager
J. Thomas, System Engineering
R. Thompson, Maintenance
W. Vonosdale, Outage Specialist
K. Wilkes, Operations Superintendent
D. Willis, System Engineer
C. Wolson, System Engineering
C. Woolson, Balance of Plant Engineering Manager

ITEMS OPENED AND CLOSED

Opened and Closed

50-327, 328/01-06-01	NCV	Licensee Identified Failure to Promptly Identify and Correct Long-standing Problems with Safety-Related Chillers. (Section 4OA7)

Opened

50-327, 328/01-06-02	URI	Residual Heat Removal System Venting Methodology. (Section 4OA2c)

PARTIAL LIST OF DOCUMENTS REVIEWED

Procedures

Number	Description/Title	Revision
MMDP-1	Maintenance Management System	4
NADP-3	Managing the Operating Experience Program	2
ODM-1.0	Conduct of Operations	4
ODM-3.7	Operator Work Arounds	7
OPDP-1	Conduct of Operations	1
SPP-1.3	Plant Access and Security	4
SPP-2.2	Administration of Site Technical Procedures	8
SPP-2.5	Vendor Manual Control	3
SPP-3.1	Corrective Action Program	2
SPP-6.1	Work Order Process Initiation	1

Audits, Self-Assessments, Safety Review Committee Minutes, and Trend Reports

Number	Description
SQN-SIT-01-002	Self Assessment/Corrective Action Programs
SQN-SIT-00-003	Site Human Performance
NA-CH-00-002	Corporate Nuclear Assurance Corrective Action Program Assessment
SQN-LIA-01-001	Operating Experience
SQN-TRN-01-001	Crew Performance Annual Review
SA-NSS-01-001	Control Personnel, Packages, and Materials, and Vehicles
SA-TRN-01-002	Biennial Review of Operations Training Programs & Curriculum Review Committees
L17 010216 800	Engineering and Technical Services - TVAN-Wide - Interim Audit Report SSA0006
L42 010831 800	Minutes of Meeting No. 163 of the Sequoyah Nuclear Safety Review Board, August 2-3, 2001
L42 010406 800	Minutes of Meeting No. 162 of the Sequoyah Nuclear Safety Review Board, March 8-9, 2001
SQN-M&M-01-005	Conduct of Maintenance
CPR-LIA-01-003	NRC Performance Indicators
SQN-OPS-01-001	Status/Configuration Control
N/A	Sequoyah Nuclear Plant Quarterly Site Level Corrective Action Program Trend Analysis Report for July-September 2001

Auxiliary Feedwater Problem Evaluation Reports and Work Orders

PER 01-000332-000	PER 00-010126-000	PER 01-000715-000
PER 01-009704-000	PER 01-009698-000	PER 01-003514-000
WO 01-009224-000		

Corrective Action Process Problem Evaluation Reports

PER 00-009637-000	PER 01-007745-000	PER 01-006788-000
PER 01-006777-000	PER 01-007740-000	PER 01-007745-000
PER 01-007998-000		

Emergency Diesel Generator Problem Evaluation Reports and Work Orders

PER 01-007257-000	PER 00-011360-000	PER 01-000636-000
PER 00-011422-000	PER 01-010452-000	PER 01-000489-000
PER 01-007184-000	PER 01-007350-000	PER 01-008578-000
WO 01-009245-000	WO 01-010572-000	WO 01-008387-000
WO 01-005738-000	WO 01-005373-000	WO 01-007806-000
WO 01-010458-000	WO 01-000547-000	WO 01-007541-000
WO 01-002605-000		

Emergency Operating and Abnormal Operating Procedure Problem Evaluation Reports

PER 01-006991-00	PER 01-002674-000	PER 01-003481-000
PER 01-004246-000	PER 01-009183-000	PER 01-000597-000
PER 01-003181-000	PER 01-006639-000	

Emergency Response Problem Evaluation Reports

PER 01-008117-000	PER 01-007985-000	PER 01-004922-000
PER 01-004172-000	PER 01-003641-000	PER 01-002394-000

Main Steam Isolation Valves Problem Evaluation Reports

PER 01-004299-000	PER 01-007194-000
PER 01-002282-000	PER 01-000282-000

Non-cited Violations Reviewed

NCV 2001-003-04	"Failure to Adequately Maintain Abnormal Operating Procedure”
NCV 2000-008-02	“Failure to Test the Turbine Driven Auxiliary Feedwater Pump Steam Supply Transfer Function”
NCV 2000-008-03	“Failure to Prevent Recurrence of Excessive Gas Accumulation in the RHR System”
NCV 2000-007-02	“Failure to Identify and Correct Procedure Deficiencies used to Vent RHR Discharge Piping”

NCV 2000-007-03 “Failure to Store Unattended Safeguards Information in a Locked Security Storage Container"

Operating Experience Problem Evaluation Reports

PER 01-010240-000	PER 01-009416-000	PER 01-008801-000

Operating Experience Personnel Contamination Reports

20010037	20010053	20010062
20010040	20010055	20010075
20010041	20010060	20010076
20010050	20010061	20010078

Radiation Protection Problem Evaluation Reports

PER 00-011420-00	PER 01-009842-000	PER 01-010420-000
PER 01-001026-000	PER 01-010126-000	PER 01-007749-000

Residual Heat Removal System PERs

PER 01-008010-000	PER 00-002224-00	PER 00-008645-000

Site Security Problem Evaluation Reports and Work Orders

PER 01-008464-000	PER 01-007351-000	PER 01-007393-000
PER 01-008185-000	PER 01-008196-000	PER 01-008211-000
PER 01-001500-000	PER 01-007351-000	PER 01-007393-000
PER 01-008464-000	PER 01-008185-000	PER 01-008196-000
PER 01-008211-000	PER 01-001500-000	PER 01-007994-000
PER 01-008885-000	PER 01-001400-000	PER 01-000726-000
PER 01-000328-000	PER 01-006209-000	PER 01-006432-000
WO 01-003319-000	WO 01-005710-000	

Miscellaneous Problem Evaluation Reports

PER 01-005995-000	PER 01-003429-000	PER 01-006469-000
PER 01-000310-000	PER 00-011349-000	PER 99-006964-000
PER 01-000142-000	PER 01-000253-000	PER 01-000241-000
PER 01-000233-000	PER 01-000255-000	PER 01-000159-000
PER 00-004539-00	PER 01-005958-000	PER 01-005960-000
PER 01-005962-000	PER 01-005963-000	PER 01-004753-000
PER 00-011088-000	PER 01-000770-000	PER 01-002605-000

Miscellaneous Work Orders

WO 01-000068-000	WO 01-010440-000	WO 01-009437-000
WO 01-007228-000	WO 01-007228-000	WO 00-007010-000

WO 01-009437-000	WO 01-000330-000	WO 01-008595-000
WO 01-008814-000	WO 01-006441-000	WO 00-011069-000
WO 01-005707-000	WO 01-002687-000	WO 01-009929-000

Miscellaneous Documents Reviewed

IE Notice 2001-07, "Unescorted Access Granted on the Basis of Incomplete and/or Inaccurate Information"
Maintenance Rule Performance Criteria Trending Data Root/Common Cause Report for PER 2000-011349-000
Sequoyah Nuclear Plant (SQN) - Corrective Action Program Indicators for October 2001, dated November 29, 2001