

OPER. #	STATION	DESCRIPTION OF PROCESS	Name	Date
10	QUALITY RELEASE	REVIEW AND APPROVE MTS. RECEIVED APPROVAL FROM EIO ON <u>12/13/04</u> FROM <u>Pete</u>	<u>Chl</u>	<u>12/15/04</u>
15	PATTERN NPAT SOP 0100REV2	APPLY APPROPRIATE PART NUMBER, SERIAL NUMBER, FOUNDRY MARK, TO THE PATTERN. CAST ON BARS REQUIRED.  <u>Cast on bars added - Marked "C1" - Pad number, etc., with have to be stamped</u>	<u>Chl</u>	<u>12/15/04</u>
20	COREMAKE CORE SOP 0100 REV 6 CALIBRATION PER CORE SOP 0200R4/0300R6	MAKE CORES IN SAND MIXTURES AS DESCRIBED BY METALTEK ENGINEERING AND VERIFIED IN MODELING TRIALS. METALTEK CORE SOP 0100 REV 6) CORE WASH WITH ZIRCONIUM CORE WASH (CALIBRATION OF EQUIPMENT REQUIRED PER CORE SOP 0200, R4 / 0300, R6)	<u>Chl</u>	<u>12/15/04</u>
30	MOLD MOLD SOP 0400 REV 8 CALIBRATION PER MOLD SOP 0900 REV 5 PREPARATION PER MOLD SOP 1100R2/1200R2/13 00R1 SAND TESTING PER MOLD SOP 1400R2/1500R3/16 00R2	VERIFY COUNT AND INSPECT.  MOLD PER WORK INSTRUCTIONS IN MAPICS ROUTING AND SOPS REFERENCED. ENGINEER OF RECORD - ROGER BROMAN, CONSULT ON MOLD-RELATED CONCERNS. MOLD MATERIALS REQUIRED PER MAPICS BOM. NOTIFY ENGINEER OF ANY SUBSTITUTIONS.	<u>Chl</u>	<u>12/15/04</u>
40	POUR MELT SOP 0100R5 MELT SOP 0700R2 MELT SOP 0600R2	METAL MUST BE AOD REFINED OR AOD INGOT. VIRGIN METAL ADDITIONS ALLOWED. RECORD POURING TEMPERATURE: <u>2750</u> CASTING POUR AT: <u>5:30</u> DATE: <u>12/20/04</u> HEAT #s: <u>2712B, 27729, 27730, 27731</u> ELAPSED POUR TIME <u>105 SEC</u> KEEL BLOCKS POURED: <u>YES</u> Sample from ladle to be analyzed for final chemical analysis and reported on material certifications. Sample Taken by: <u>JG</u> Analyzed: <u>J. Gabooske</u> Date: <u>12-19-04</u>	<u>Chl</u>	<u>12/19/04</u>
50	MELT SOP 0800R2	SHAKEOUT	<u>Chl</u>	<u>12-26-04</u>

SIGNED WORKING BOX  
CDA 12-26-04

Dated Issued: 12-14-04

60	ARC RISE SOP 0100R1	REMOVE RISERS AS DIRECTED BY SUPERVISOR.	MW MW	1-3-05
70	HEAT TREAT HEAT SOP 0103R5	SOLUTION ANNEAL. MAKE SURE TO BLOCK ALL FLANGES OF FORM AND RACETRACK TO MINIMIZE CREEP DISTORTION.	DLS F5-1	12/7/04
75	PHYSICAL TESTING	OBTAIN TEST SPECIMENS AND SUBMIT FOR PHYSICAL TESTING. REPORT RESULTS AS PART OF STEP 510.	WA	12/28/04
80	GRIND GSA SOP 0100R3 GCHI SOP 0100R2	SWING GRIND TO REMOVE RISER REMAINS AND FLASH IF REQUIRED. CHIP AND HAD GRIND SURFACE OF PART AS REQUIRED FOR CONTOUR.	SA	1-2-05
90	SAND BLAST BLAS SOP 0100R6	SANDBLAST (REMOVE ALL BLAST MATERIAL FROM CASTING) SANDBLASTING WILL BE DONE USING RECYCLED SHARP ANGULAR AGGREGATE.	MG TV	1-6-05 1-6-05
110	VISUAL INSPECTION CQP-500 REV 4	VISUALLY INSPECT 100% OF COMPONENT ACCORDING TO ASTM A802 LEVEL 3 ALL CONDITIONS. IF OK CHECK HERE <input checked="" type="checkbox"/> . MARK AND REPAIR AT STEP 120.	VT- LEVEL II PMA	1-7-05
NOTICE	WITNESS NOTIFICATION	PROVIDE NOTICE TO EJO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF LP STEP. EJO NOTIFIED ON 1/3/05 DCMA NOTIFIED ON 1/3/05	Q ENG OR QA MGR	1-7-05
115	100% L.P. CQP 0300 REV 10	L.P. 100% OF COMPONENT. ACCEPTANCE PER ASTM A903. ACCEPTANCE CRITERIA-LEVEL 1 FOR HIGH STRESSED AREAS, LEVEL 2 FOR ALL OTHER AREAS. SEE LP DRAWING. IF OK CHECK HERE <input checked="" type="checkbox"/> . MARK AND REPAIR AT STEP 120.	LP- LEVEL II KRA	1-7-05
120	WELD SOP 0100 REV 7	EXCAVATE ANY DEFECTS FOUND DURING 100% VISUAL AND LP INSPECTION.	LP- LEVEL II Dp	1-12-05
130	L.P. EXCAVATION CQP-300 REV 10	L.P. ALL EXCAVATIONS PRIOR TO WELDING TO ENSURE REMOVAL OF DEFECT. ACCEPTANCE PER A903. ACCEPTANCE CRITERIA-LEVEL 1 FOR HIGH STRESSED AREAS, LEVEL 2 FOR ALL OTHER AREAS. SEE LP DRAWING.	LP- LEVEL II	1-12-05
165	SAND BLAST BLAS SOP 0100R6	SANDBLAST (REMOVE ALL BLAST MATERIAL FROM CASTING) SANDBLASTING WILL BE DONE USING RECYCLED SHARP ANGULAR AGGREGATE.	LP- LEVEL II	1-12-05
170	WELD MAP	MAP ALL WELDS WITH DIGITAL PHOTOGRAPHS. SERIALIZE DEFECTS ON CASTING, USE SCALE IN PHOTOS AND DOCUMENT SIZE. THIS IS TO BE PERFORMED BY SUPERVISOR, INSPECTOR, MAN OR THEIR DESIGNEE, FILE WITH QA. USE YELLOW MARKER.	LP- LEVEL II build and after RT	1-12-05

1/7/04  
17/04

delivered  
pending  
x 1/2/05

1/2/05

Energy Industries of Ohio

Manufacturing and Test Sequence (MTS) Serial Number C-1

CO# 40851, MS73140 Dated December 14, 2004 Revision: Original Page 3 of 8 Dated Issued: 12-14-04

NOTICE	WITNESS NOTIFICATION	MUST SEND REPORT ON ALL WELDS OVER 10% OF NOMINAL WALL THICKNESS TO CUSTOMER. DEFECTS > 10% YES, REPORT SENT BY DATE SIGN BY QA ENG.	W/A
180	HOLD POINT	PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF XRAY AND DIMENSIONAL STEPS. EIO NOTIFIED ON 1/14/05 DCMA NOTIFIED ON 1/18/05	Q ENG OR QA MGR C. H. 1/13/05
190	HOLD POINT	HOLD FOR APPROVAL OF XRAY PROCEDURES. RECEIVE APPROVAL FROM EIO ON 1/11/05 from R.D.	QA MGR C. H.
190	X-RAY AT MQS MQS PROCEDURE 20.11.010 REV 0	X-RAY PER TECHNIQUE # 12736 USE CALIBRATED DENSITOMETER FOR DENSITY VERIFICATION. WHEN MARKING USE BLACK MARKERS. ATTACH TECHNIQUE, READER SHEET FOR ALL RADIOGRAPHS. MUST INDICATE RADIOGRAPHER AND ASNT CERTIFICATION LEVEL ON READER SHEET.	RT - LEVEL II J. H. 1-12-05
200	LAYOUT Lawton's procedure	INSPECT CASTING TO VERIFY DIMENSIONS. THIS MAY BE PERFORMED BEFORE OR AFTER STEP 190. DIMENSIONED 1/10 & 11/05 DATE by 3D SCANNING RELEASED 50560075 (ENGINEER ONLY)	
210	X-RAY CQP 401 REV 5	X-RAY INTERPRETATION. ACCEPTANCE MSS SP 54. ATTACH TECHNIQUE, READER SHEET FOR ALL RADIOGRAPHS. MUST INDICATE RADIOGRAPHER AND ASNT CERTIFICATION LEVEL ON READER SHEET. IF OK CHECK HERE AND SEND TO STEP 370.	RT - LEVEL II RBK 1-19-05
220	WELD SOP 0100 REV 7	REJECTED CHECK HERE MARK UP DEFECTS AND SEND THE CASTING TO STEP 260. EXCAVATE ANY DEFECTS FOUND DURING RADIOGRAPHY.	LP - LEVEL II C. C. 2-17-05
230	LP EXCAVATION CQP 300 REV 10	LP ALL EXCAVATIONS PRIOR TO WELDING TO ENSURE REMOVAL OF DEFECT. ACCEPTANCE PER A903. ACCEPTANCE CRITERIA-LEVEL 1 FOR HIGH STRESSED AREAS, LEVEL 2 FOR ALL OTHER AREAS. SEE LP DRAWING.	LP - LEVEL II C. C. 2-17-05
240	WELD MAP	MAP ALL WELDS WITH DIGITAL PHOTOGRAPHS. SERIALIZE DEFECTS ON CASTING, USE SCALE IN PHOTOS AND DOCUMENT SIZE. THIS IS TO BE PERFORMED BY SUPERVISOR, INSPECTION LEAD MAN OR THEIR DESIGNEE, FILE WITH QA. MUST SEND REPORT ON ALL WELDS OVER 10% OF NOMINAL WALL THICKNESS TO CUSTOMER. DEFECTS > 10% YES, REPORT SENT BY R. S. 10 DATE 2/18/05 SIGN BY QA ENG. R. S. 10	Q ENG OR QA MGR C. H. 1/11/05
NOTICE	WITNESS NOTIFICATION	PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF WELD STEP. EIO NOTIFIED ON 1/11/05 DCMA NOTIFIED ON 1/18/05	Q ENG OR QA MGR C. H. 1/11/05
260	QA APPROVAL HOLD POINT	QA TO APPROVE ELECTRODE PRIOR TO USE. C. H. 1/11/05 MOD L. H. 1/11/05 MATERIAL USED: 15-6 WALSLEY Date: 2/18/05 QUALITY ENG. Name: R. S. 10 Date: 2/18/05	2/18/05

1/11/05

1/25/05

1/25/05



270	WELD SOP 0100 REV 7	WELD REPAIR DEFECTS AS MARKED. FOR WELDS <2" - WPS 10-SMAW-CF8MMN MOD REV 1 FOR WELDS <8" - WPS 15-GMAW-CF8MMN MOD REV 2			
280	GRIND GCH SOP 0100R2	HAND GRIND WELDS.			3/5/05
290	L.P. WELD CQP 0300 REV 10	L.P. WELD REPAIRS ACCEPTANCE PER ASTM A903. ACCEPTANCE CRITERIA-LEVEL 1 FOR HIGH STRESSED AREAS, LEVEL 2 FOR ALL OTHER AREAS. SEE LP DRAWING. IF OK CHECK HERE <input checked="" type="checkbox"/> WASH AND SEND TO STEP 300. IF REJECTED CHECK HERE _____ AND RETURN TO STEP 220.	LP - LEVEL II AKK		3/5/05
295	REPEAT	REPEAT STEPS 220 TO 290 AS REQUIRED TILL CLEAR THROUGH VISUAL INSPECTION & PENETRANT INSPECTION. DOCUMENT REWORK ON A SUPPLEMENTAL MTS	QA N/A		
296	TEST MAG PERM SOP MAG PERM 100, REV 1	TEST MAG PERMEABILITY REPAIR AREAS RECORD ON WELD MAP LIST. TEST AT LEAST 5 POINTS PER WELD. ACCEPTANCE 1.02. IF OK CHECK HERE <input checked="" type="checkbox"/> AND GO TO STEP 430. IF REJECTED CHECK HERE _____	AKK		3/5/05
300	GRIND GCH SOP 0100R2	GRIND AREAS OF NON COMPLIANCE AND RETURN TO STEP 295. REPEAT UNTILL COMPLIANCE IS ACHIEVED.	N/A		
310 A	X-RAY ( NOTE)	IF RADIO GRAPHED AREAS ARE GREATER THAN FOUR TO FIVE INCHES THE CASTING WILL BE SENT TO MQS. SEND TO MQS CHECK HERE <input checked="" type="checkbox"/> RADIOGRAPH AT CAF CHECK HERE _____	QA ENGINEER 3/7/05		
310 B	MQS X-RAY DEFECTS REPAIRED BY WELDING	X-RAY PER TECHNIQUE # 12726 USE CALIBRATED DENSITOMETER FOR DENSITY VERIFICATION. ATTACH TECHNIQUE, READER SHEET FOR ALL RADIOGRAPHS. MUST INDICATE RADIOGRAPHER AND ASNT CERTIFICATION LEVEL ON READER SHEET.	LEVEL II 1.11		2/29/05
320	CAF X-RAY DEFECTS REPAIRED BY WELDING CQP 401 REV 5	X-RAY PER TECHNIQUE # 12726 USE CALIBRATED DENSITOMETER FOR DENSITY VERIFICATION. ATTACH TECHNIQUE, READER SHEET FOR ALL RADIOGRAPHS. MUST INDICATE RADIOGRAPHER AND ASNT CERTIFICATION LEVEL ON READER SHEET.	RT - LEVEL II N/A		
	X-RAY CQP 401 REV 5	X-RAY INTERPRETATION. ACCEPTANCE MSS SP 54. ATTACH TECHNIQUE, READER SHEET FOR ALL RADIOGRAPHS. MUST INDICATE RADIOGRAPHER AND ASNT CERTIFICATION LEVEL ON READER SHEET. IF OK CHECK HERE _____ AND SEND TO STEP 340. REJECTED CHECK HERE <input checked="" type="checkbox"/> MARK-UP DEFECTS AND SEND THE CASTING TO STEP 220.	RT - LEVEL II ABK		3-21-05

Energy Industries of Ohio

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REPEAT STEPS 220 TO 320 AS REQUIRED TILL WELDS CLEAR X-RAY. DOCUMENT REWORK ON QA ENG.

A SUPPLEMENTAL MTS

340

SAND BLAST  
BLAS SOP  
0100R6

SANDBLAST (REMOVE ALL BLAST MATERIAL FROM CASTING) SANDBLASTING WILL BE DONE USING RECYCLED SHARP ANGULAR AGGREGATE.

Supplemental supplied on 3/24/05

3-22

WITNESS  
NOTIFICATION

PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF VISUAL AND LP STEPS.

EIO NOTIFIED ON 3/16/05

DCMA NOTIFIED ON 3/16/05

Q ENG  
OR QA  
MGR

FINAL VISUAL  
INSPECTION  
CQP-500 REV 4

VISUALLY INSPECT 100% OF COMPONENT ACCORDING TO ASTM A802 LEVEL 2 ALL CONDITIONS.

IF OK CHECK HERE ☒ 3/30/05 Final OK

IF REJECTED CHECK HERE ☐ MARK AND REPAIR AT STEP 390.

MUST BE PERFORMED BY LEVEL II IN VT.

FINAL L.P. 100% OF COMPONENT. ACCEPTANCE PER ASTM A903. ACCEPTANCE CRITERIA- LEVEL 1 FOR HIGH STRESSED AREAS, LEVEL 2 FOR ALL OTHER AREAS. SEE LP DRAWING.

FINAL L.P.  
CQP 0300  
REV 10

IF OK CHECK HERE ☒

WASH AND SEND TO STEP 455.

IF REJECTED CHECK HERE ☐

EXCAVATE ANY DEFECTS FOUND DURING FINAL PENETRANT INSPECTION.

WELD SOP 0100  
REV 7

L.P. EXCAVATION  
CQP-300  
REV 10

L.P. ALL EXCAVATIONS PRIOR TO WELDING TO ENSURE REMOVAL OF DEFECT. ACCEPTANCE PER A903.

WELD MAP

MAP ALL WELDS WITH DIGITAL PHOTO/MAPS. SERIALIZE DEFECTS ON CASTING, USE SCALE IN PHOTOS AND DOCUMENT SIZE. THIS IS TO BE PERFORMED BY SUPERVISOR, INSPECTION LEAD MAN OR THEIR DESIGNEE. FILE WITH QA. MUST SEND REPORT ON ALL WELDS OVER 10% OF NOMINAL WALL THICKNESS TO CUSTOMER. NOMINAL WALL THICKNESS TO CUSTOMER. DEFECTS > 10% YES REPORT SENT BY RS DATE 3/23 DEFECTS < 10% RS SIGN BY QA ENG.

GRIND GCHI SOP  
0100R2

GRIND AREAS OF NON COMPLIANCE AND RETURN TO STEP 410. REPEAT UNTILL COMPLIANCE IS ACHIEVED.

WELD SOP 0100  
REV 7

WELD REPAIR DEFECTS AS MARKED.  
FOR WELDS < 2" - WPS 10-SMAW-CF8MNMN MOD REV 1  
FOR WELDS < 8" - WPS 15-GMAW-CF8MNMN MOD REV 2

N/A

3-2805



440	GRIND GCHI SOP 0100 REV 2	HAND GRIND WELDS.			CG	3/28/05
450	L.P. WELDS COP 0300 REV 10	L.P. WELD REPAIRS ACCEPTANCE PER ASTM A903. IF OK CHECK HERE <input checked="" type="checkbox"/> WASH AND SEND TO STEP 460. IF REJECTED CHECK HERE _____ AND RETURN TO STEP 390.			LP - LEVEL II PDA	3/30/05
451	REPEAT	REPEAT STEPS 350 TO 450 AS REQUIRED TILL WELDS CLEAR FINAL LIQUID PENETRANT INSPECTION. DOCUMENT REWORK ON A SUPPLEMENTAL MTS			QA ENG N/A	
452	TEST MAG PERM SOP MAG PERM 100, REV 1	TEST MAG PERMEABILITY REPAIR AREAS. RECORD ON WELD MAP LIST. TEST AT LEAST 5 POINTS ACCEPTANCE 1.02. IF OK CHECK HERE <input checked="" type="checkbox"/> AND GO TO STEP 430. IF REJECTED CHECK HERE _____			CFA	3/28/05
452	GRIND GCHI SOP 0100R2	GRIND AREAS OF NON COMPLIANCE AND RETURN TO STEP 451. REPEAT UNTILL COMPLIANCE IS ACHIEVED.			N/K	
NOTICE	WITNESS NOTIFICATION	PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF LAYOUT AND MAG PERM STEPS. EIO NOTIFIED ON 3/23/05 DCMA NOTIFIED ON 3/23/05			Q ENG OR QA MGR	OK
455	LAYOUT	LAYOUT PRODUCTION PARTS PROCEDURE TO BE DETERMINED (PERFORMED AFTER FIRST ARTICLE APPROVAL) MAY BE PERFORMED BEFORE OR AFTER STEP 460-480. PERFORM MAG PERM TESTING WITH SEVRIN GAUGE. ACCEPTANCE 1.02. CHECK THE ENTIRE SURFACE ON A 6" BY 6" GRID. REPORT RESULTS. USE A 6" SQUARE BLOCK TO INDICATE TEST LOCATIONS AND RECORD RESULTS. COMPLIANT AREAS WILL NOT BE MARKED. MARK NONCOMPLIANT AREAS WITH AN "X" FOR REPAIR. OK CHECK HERE <input checked="" type="checkbox"/> AND GO TO STEP 490. IF REJECTED CHECK HERE _____			Deliberate	
460	FINAL MAG PERM INSPECTION SOP MAG PERM 100, REV 1				OK	3/30/05
470	GRIND GCHI SOP 0100 REV 2	HAND GRIND WITH SUITABLE CONE OR OTHER SIMILAR GRINDER AS REQUIRED TO ENSURE REMOVAL OF MATERIAL TO ACHIEVE MAG PERM REQUIREMENT. CIRCLE AREA REMEDIATE FOR RETEST.			N/A	
480	RETEST MAG PERM SOP MAG PERM 100, REV 1	RETEST MAG PERMEABILITY AT FAILED TEST POINTS. MARK NONCOMPLIANT AREAS WITH AN "X" FOR REPAIR. ACCEPTANCE 1.02. IF OK CHECK HERE <input checked="" type="checkbox"/> IF REJECTED CHECK HERE _____ RETURN TO STEP 470			N/A	
490	PHOTOGRAPH	TAKE DIGITAL PICTURES.			↓	
	Sand Blast				RAM	3/28/05
					CAD	3/31/05

**Energy Industries of Ohio**  
**Manufacturing and Test Sequence (MTS) Serial Number C-1**

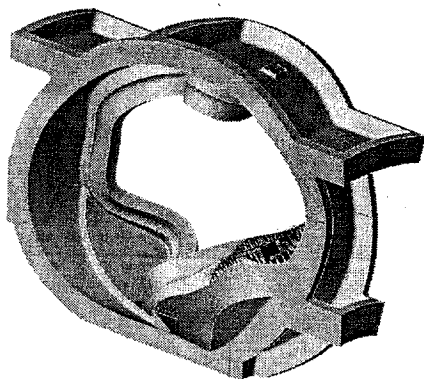
**CO# 40851, MS73140**      **Dated December 14, 2004**      **Revision: Original**      **Page 7 of 8**      **Dated Issued: 12-14-04**

500	AUDIT REVIEW	PROCESS DOCUMENT TO PROGRAM MANAGER FOR COMPLIANCE AUDIT.		3/31/05 <i>ent</i>	
510	DOC. REVIEW	REVIEW DOCUMENTS AS REQUIRED IN CAF CHECKLIST; ALL DOCUMENTS NOTED TO BE ACCESSIBLE FOR AUDITING. (SHIPPER, C OF C, M.T.R., M.T.S., INSPECTION REPORT, X-RAY READER SHEETS AND HEAT TREAT CHARTS)		3/31/05 <i>ent</i>	
NOTICE	RELEASE FROM EIO	PROVIDE DOCUMENTS TO EIO. SENT ON <u>4/4/05</u> BY <u><i>ent</i></u> . RECEIVED RELEASE FROM EIO ON <u>3/30/05</u>		Q ENG OR QA MGR	
520	PACK AND SHIP	PACKAGE AND SHIP TO MAJOR TOOL.		3/31/05 CARUUD	
1000	REVISION HISTORY	ORIGINAL 12-14-04. approved 12-14-04.			



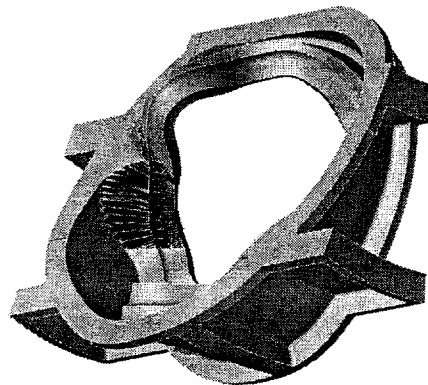
Page 8 of 8 Revised 1-26-05 to clarify and illustrate the critical areas (CLASS 1) of the C-1 Coil

CLASS 2 ALL OTHERS

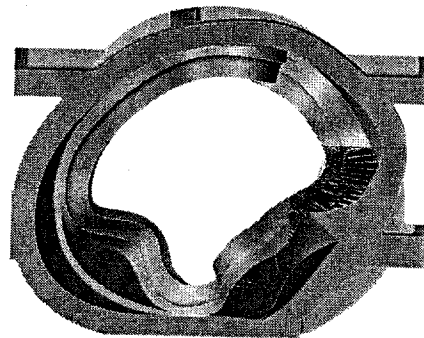


GENERAL ISOMETRIC  
VIEW FROM TOP SIDE

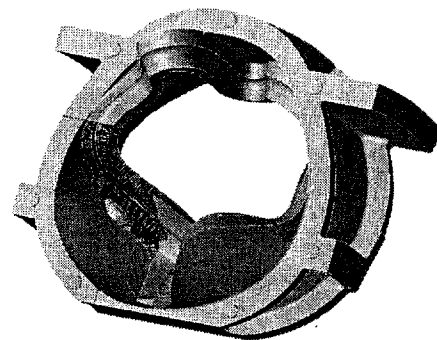
**RED AREA INDICATES HIGH STRESSED AREA**



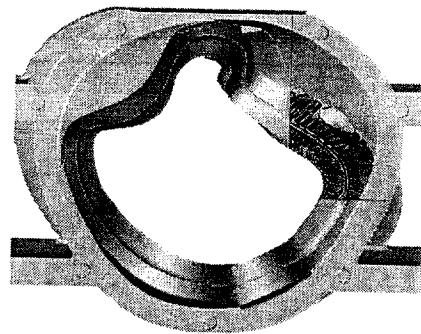
TOP SIDE ISOMETRIC



TOP SIDE VIEW



BOTTOM SIDE ISOMETRIC



BOTTOM SIDE VIEW



# NOTES: Weld repair of C-1 Coil Casting

Date: 3-21-05

## SUPPLEMENTAL ROUTING CARD

PART NUMBER: C-1 Coil

SERIAL NUMBER: C-1

AUTHORITY  
C Ruud

OPER  
NUMBER

STATION

OPERATOR  
SIGN/DATE

220	WELD SOP 0100 REV 7	EXCAVATE ANY DEFECTS FOUND DURING RADIOGRAPHY.				
230	L.P. EXCAVATION CQP-300 REV 10	L.P. ALL EXCAVATIONS PRIOR TO WELDING TO ENSURE REMOVAL OF DEFECT. ACCEPTANCE PER A903. ACCEPTANCE CRITERIA-LEVEL 1 FOR HIGH STRESSED AREAS, LEVEL 2 FOR ALL OTHER AREAS. SEE LP DRAWING.		LP - LEVEL II 3/24/05		
240	WELD MAP	MAP ALL WELDS WITH DIGITAL PHOTO/MAPS. SERIALIZE DEFECTS ON CASTING, USE SCALE IN PHOTOS AND DOCUMENT SIZE. THIS IS TO BE PERFORMED BY SUPERVISOR, INSPECTION LEAD MAN OR THEIR DESIGNEE, FILE WITH QA. MUST SEND REPORT ON ALL WELDS OVER 10% OF NOMINAL WALL THICKNESS TO CUSTOMER. DEFECTS > 10% YES <input checked="" type="checkbox"/> , REPORT SENT BY <u>R. S. C. R. I. G.</u> DATE <u>3/22/05</u> DEFECTS < 10% <input type="checkbox"/> SIGN BY QA ENG.		25		3/22/05
NOTICE	WITNESS NOTIFICATION	PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF WELD STEP. <u>WAVE &amp; Rube</u> EIO NOTIFIED ON <u>3/21/05</u> DCMA NOTIFIED ON <u>3/21/05</u>		Q ENG OR QA MGR		<u>C. R. L.</u>
260	QA APPROVAL HOLD POINT	QA TO APPROVE ELECTRODE PRIOR TO USE OF D PROCEDURE USED: <u>15-GMAW-CF8MNMN</u> MATERIAL USED: <u>Cinco 6 L M N 44/55</u> QUALITY ENG. Name: <u>R. S. C. R. I. G.</u> Date: <u>3/21/05</u>				
270	WELD SOP 0100 REV 7	WELD REPAIR DEFECTS AS MARKED. FOR WELDS < 2" - WPS 10-SMAW-CF8MNMN MOD REV 1 FOR WELDS < 8" - WPS 15-GMAW-CF8MNMN MOD REV 2				<u>3/21/05</u>
280	GRIND GCHI SOP 0100R2	HAND GRIND WELDS.				<u>3/21/05</u>
290	L.P. WELD CQP 0300 REV 10	L.P. WELD REPAIRS ACCEPTANCE PER ASTM A903. ACCEPTANCE CRITERIA-LEVEL 1 FOR HIGH STRESSED AREAS, LEVEL 2 FOR ALL OTHER AREAS. SEE LP DRAWING. IF OK CHECK HERE <input checked="" type="checkbox"/> WASH AND SEND TO STEP 300. IF REJECTED CHECK HERE <input type="checkbox"/> AND RETURN TO STEP 220.		LP - LEVEL II 3/21/05		
	REPEAT	REPEAT STEPS 220 TO 290 AS REQUIRED TILL CLEAR THROUGH VISUAL INSPECTION & PENETRANT INSPECTION. DOCUMENT REWORK ON A SUPPLEMENTAL MTS		QA ENG N/A		

295	TEST MAG PERM SOP MAG PERM 100, REV 1	TEST MAG PERMEABILITY REPAIR AREAS RECORD ON WELD MAP LIST. TEST AT LEAST 5 POINTS PER WELD. ACCEPTANCE 1.02. IF OK CHECK HERE <input checked="" type="checkbox"/> AND GO TO STEP 430. IF REJECTED CHECK HERE _____.	Chris 3/31
296	GRIND GCHI SOP 0100R2	GRIND AREAS OF NON COMPLIANCE AND RETURN TO STEP 295. REPEAT UNTILL COMPLIANCE IS ACHIEVED.	NA
300	X-RAY (NOTE)	IF RADIO GRAPHED AREAS ARE GREATER THAN FOUR TO FIVE INCHES THE CASTING WILL BE SENT TO MQS. SEND TO MQS CHECK HERE _____ RADIOGRAPH AT CAF CHECK HERE <input checked="" type="checkbox"/> .	QA ENGINEER Dum 3-21-05
310 A	MQS X-RAY DEFECTS REPAIRED BY WELDING	X-RAY PER TECHNIQUE # 12726 USE CALIBRATED DENSITOMETER FOR DENSITY VERIFICATION. ATTACH TECHNIQUE, READER SHEET FOR ALL RADIOGRAPHS. MUST INDICATE RADIOGRAPHER AND ASNT CERTIFICATION LEVEL ON READER SHEET.	LEVEL II N/A
310 B	CAF X-RAY DEFECTS REPAIRED BY WELDING CQP 401 REV 5	X-RAY PER TECHNIQUE # 12726 USE CALIBRATED DENSITOMETER FOR DENSITY VERIFICATION. ATTACH TECHNIQUE, READER SHEET FOR ALL RADIOGRAPHS. MUST INDICATE RADIOGRAPHER AND ASNT CERTIFICATION LEVEL ON READER SHEET.	RT - LEVEL II Dum 3-21-05
320	X-RAY CQP 401 REV 5	X-RAY INTERPRETATION. ACCEPTANCE MSS SP 54. ATTACH TECHNIQUE, READER SHEET FOR ALL RADIOGRAPHS. MUST INDICATE RADIOGRAPHER AND ASNT CERTIFICATION LEVEL ON READER SHEET. IF OK CHECK HERE <input checked="" type="checkbox"/> AND SEND TO STEP 340. REJECTED CHECK HERE _____ MARK UP DEFECTS AND SEND THE CASTING TO STEP 220.	RT - LEVEL II ✓