



Carondelet Division

8600 Commercial Blvd. - Pevely, MO 63070 USA
Phone: 636-479-4499 - Fax: 636-479-3399

Material Test Report

ENERGY INDUSTRIES OF OHIO

Purchase Order Number PPPL-FP-LTS-2 Heat Number 29198 Pour Date 4/28/2005
Pattern Number SE-141-073 COIL C SHIM (-3 thru -6 Parts) Cert Number S73220-2 and
SE-141-033 COIL A SHIM (-1 thru -6 Parts) Cert Number S76220-1
CAF Metal Designation CF8MNMnMod
Material Spec CF8MNMN MOD

Revised 8/16/05

Element	Min	Actual	Max
C	0.040	0.070	0.070
CR	18.000	18.100	18.500
MN	2.300	2.970	2.800
MO	2.100	2.450	2.500
N	0.240	0.255	0.280
NI	13.000	13.120	13.500
P*	0.000	0.013	0.015
S*	0.000	0.010	0.015
SI	0.000	0.700	0.500

MN & SI previously reported on CA 1308 and were accepted.

*P & S taken from test from heat parts were poured from and analyzed by wet chemistry, ASTM E1019-03 for sulfur and Gravimetric for phosphorous.

This report covers the eleven castings poured from heat 29198. Only parts listed above however will be shipped for this order. Each casting has a unique number stamped in the part adjacent to the pattern number to differentiate the part and subsequent reporting that will be traced to the casting.

Respectfully Submitted,
Charles A. Ruud
Quality Assurance Manager

Superior Quality Engineered Metal Products

www.MetalTekInt.Com



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Final Inspection Report

Customer Name: ENERGY
INDUSTRIES OF
OHIO

Pattern: SE-141-033 COIL A SHIM

Order Number: PPPL-FP-LTS-2

ASTM Metal CF8MNMN MOD

Date 8/30/2005

Type Description	Cert Number	Procedure	Acceptance Criteria	Actual
Liquid Penetrant	S76220-1	CQP - 300 Rev 9	ASTM A903 Level II	Acceptable
Mag Perm	S76220-1	SOP Mag Perm 100 Rev 1	<1.02	Acceptable
Radiographic	S76220-1	Technique # 12726	MSS SP 54	Acceptable
Visual	S76220-1	CQP - 500 REV 4	ASTM A802 LEVEL 2	Acceptable

Liquid Penetrant

Technician: Jason Reese
ASNT Level III

Visual

Technician: Kevin Anderson
ASNT Level II

A handwritten signature in black ink, appearing to read "C. Ruud".

Respectfully Submitted,
Charles A. Ruud
Quality Assurance Manager

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Certificate of Conformance

ENERGY INDUSTRIES OF OHIO

Order Number PPPL-FP-LTS-2

Pattern SE-141-033 COIL A SHIM

Alloy CF8MNMnMOD

Date 8/30/2005

Cert Number

S76220-1

A shim for A-1 coil was poured from heat number 29198. No weld repairs were necessary.

A handwritten signature in black ink, appearing to read "CAR", is positioned above the signature block.

We certify that we have complied in accordance with the drawings(s) and specifications(s) listed on the above purchase order. The articles furnished were made and/or processed from parts and/or materials in accordance with all applicable drawings(s) and specifications(s) pursuant to the afore mention purchase order except as noted by corrective actions.

Respectfully Submitted,
Charles A. Ruud
Quality Assurance Manager

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Corrective Action 1308
Carondelet Division - CA / PA / RGA Database
Corrective Action Type NCR
Date 6/13/2005
CA Originator C. Ruud
Pattern Number: C and A Coil Shims 11 Pieces

Description of Defect / Non-Conformance

Chemistry for 11 shim castings is out of specification.

Root Cause

Chemistry specification was not changed in system and not communicated to Lab personnel.

Corrective Action

Specification was corrected in system and Lab personnel trained. Mag permeability was checked on the parts and are less than 1.02u.

Verification of Corrective Action

Chemistries were checked on subsequent parts and are within specification.

Preventive Action

Create Inspection and Test Plan summarizing all requirements.

Estimated Completion Date

6/15/05

Actual Completion Date

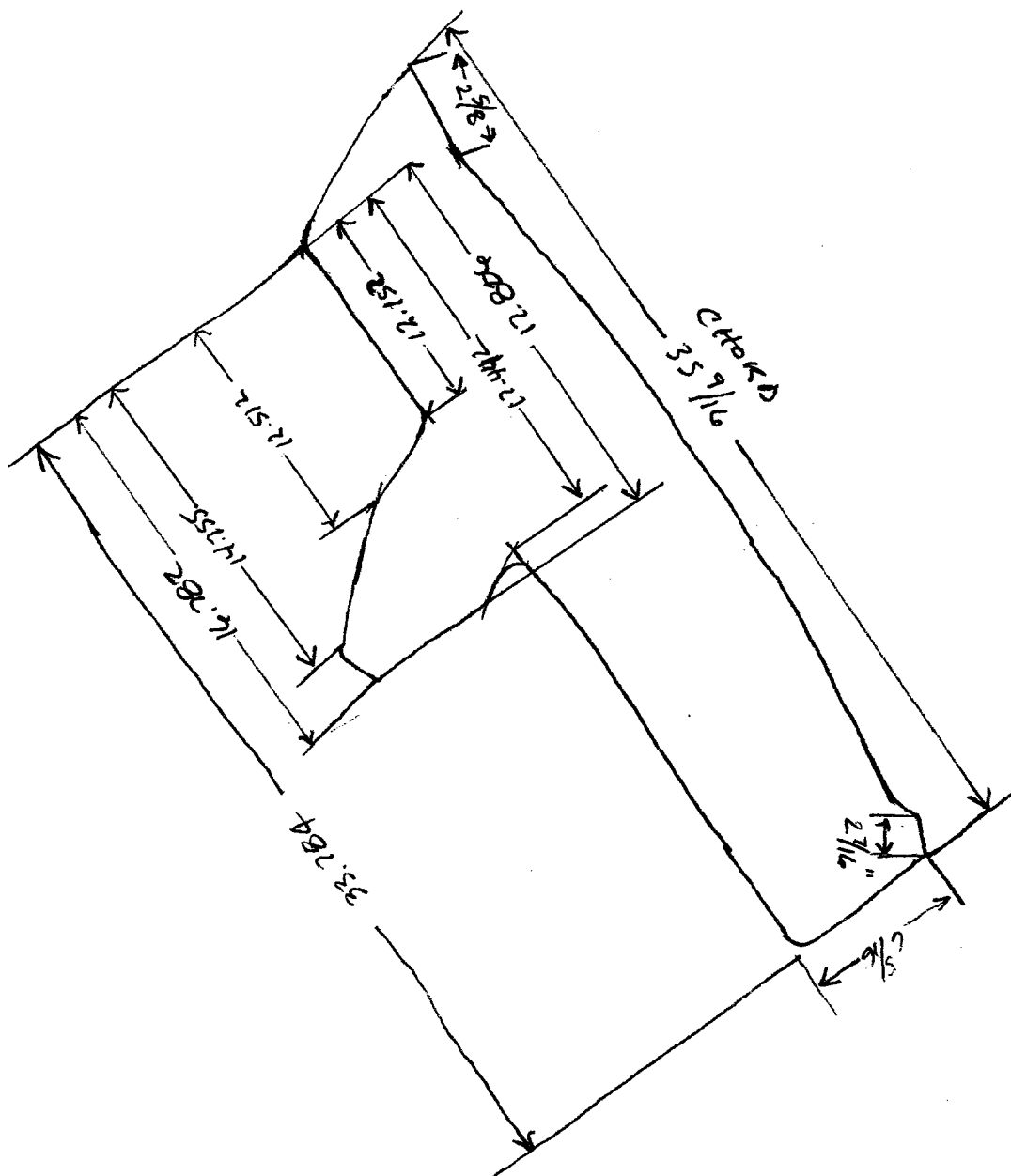
Complete.

A handwritten signature in black ink, appearing to read "C. Ruud".

Signed: C. Ruud

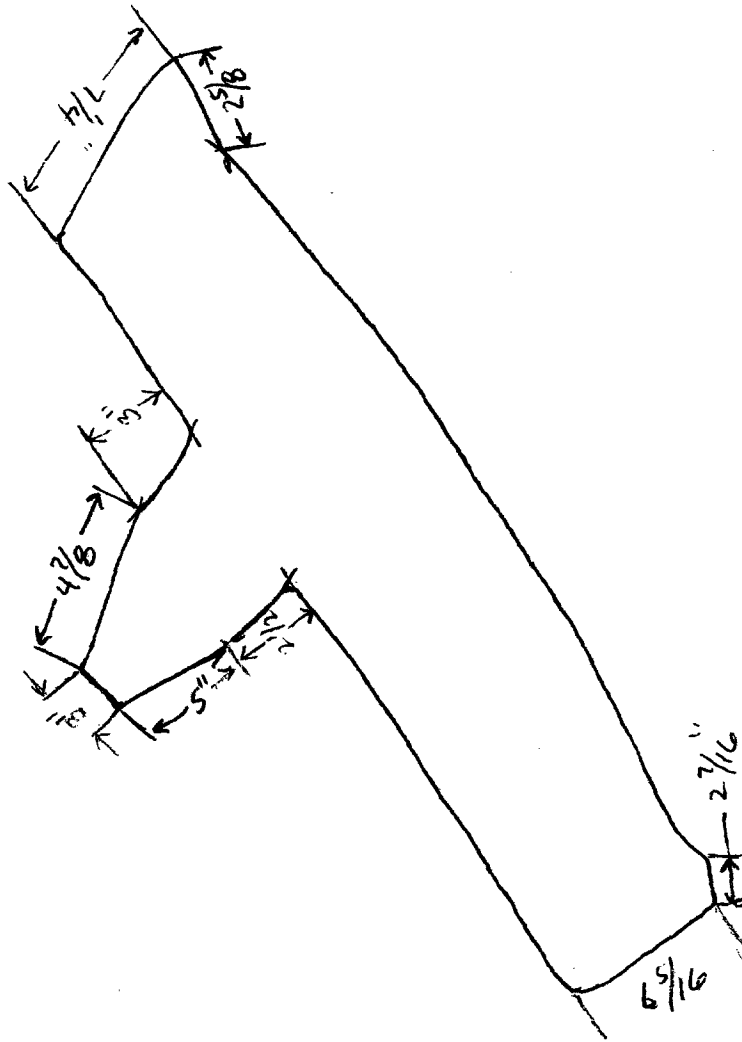
CC: Roger Broman, Barry Craig, Joe Edwards, E.J. Kubick

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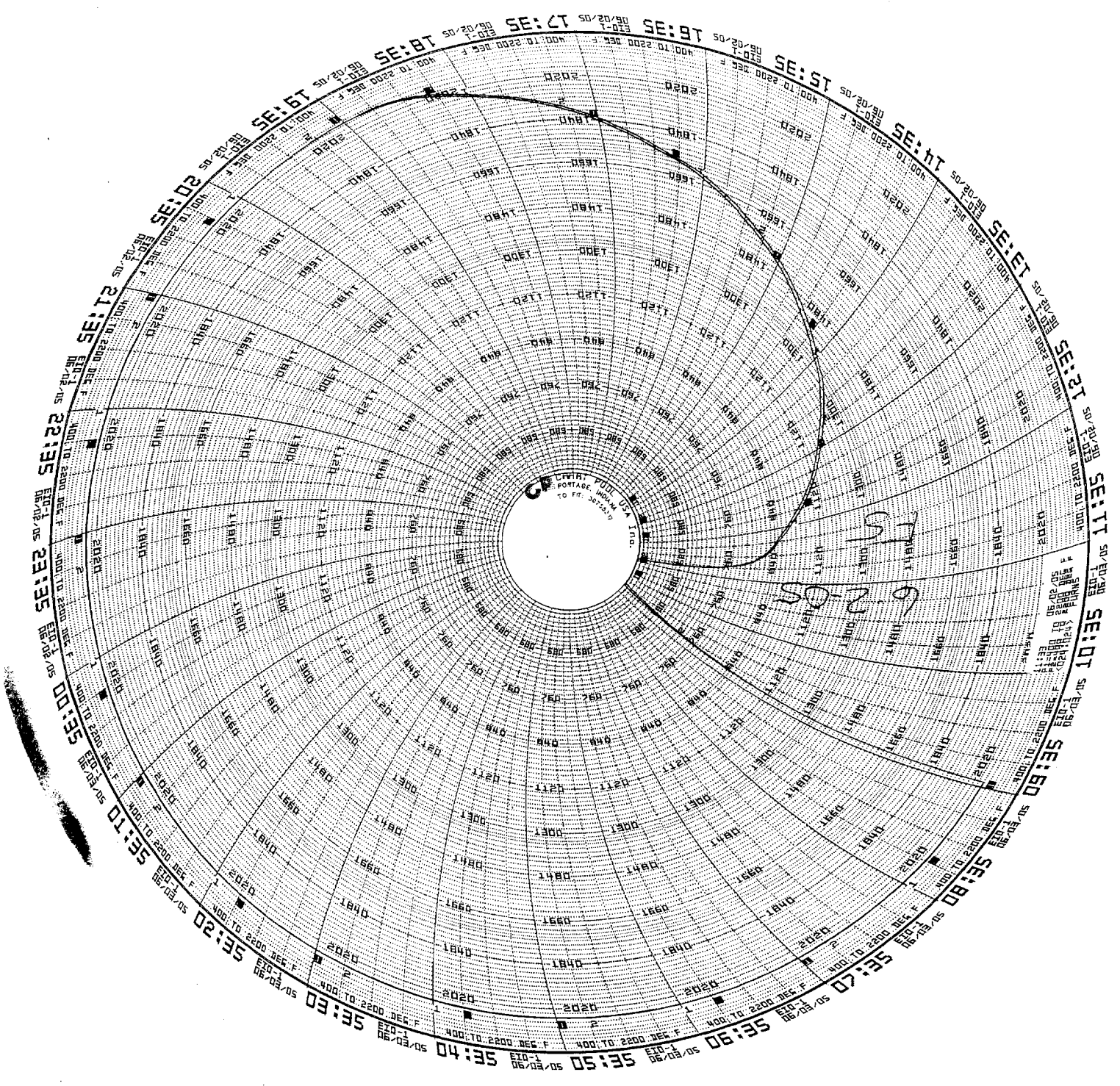


SHIM SE 141-0.33
 SKETCH 8-31-05
 DATE 10-2

J. S. J.



A + C Shims CTR





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 Chemical, Metallurgical, Mechanical, Nondestructive, Environmental Testing, Analyses and Field Service.

METALTEK INTERNATIONAL
 8600 Commercial Blvd.
 Pevely, MO 63070

August 8, 2005
 Lab No. 05P-2334
 P.O. No. 21324
 Page 1 of 3

Attention: CHUCK RUUD

REPORT OF MECHANICAL TESTS

SAMPLE ID: 1) STOCK# LNM 4455, LINCOLN LOT 3018926/78309
 2) STOCK# LNM 4455, LINCOLN LOT 3017006/72262
 3) STOCK# LNM 4455, LINCOLN LOT 3012668/82743
 4) STOCK# B316NF METRODE, W021735

Sample ID	Original Area Sq. Inches	Reduced Area Sq. Inches	Reduction in Area %	Modules of Elasticity	Yield Strength PSI	Tensile Strength PSI	Elongation (2.0" Gage Length)	
							in.	%
1	0.1385	0.0897	54.3	24.5 Msi	56900	93900	0.84	42.0
2	0.1886	0.0935	50.4	24.9 Msi	54900	92100	0.85	42.5
3	0.1909	0.0951	50.2	22.6 Msi	57400	93700	0.83	41.5
4	0.1901	0.0962	49.4	23.0 Msi	54800	88200	0.75	37.5

Round, reduced section all weld tensiles

Yield taken at .2% offset

Tested in accordance with ASTM A 370-03a

Identification of tested specimens provided by the client.

KS/tlv

Karl Schmitz, Director
 Materials Testing



Certificate No. 0397-01
 Certificate No. 0397-02

AN OFFICIAL COPY OF TEST REPORT WILL BE PROVIDED BY THIS LABORATORY ON REQUEST.
 NOT OFFICIAL WITHOUT THE RAISED SEAL OF ST. LOUIS TESTING LABORATORIES, INC.
 SEE REVERSE FOR CONDITIONS.





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Lab No. 05P-2334
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Page 2 of 3

Attention: Chuck Ruud

REPORT OF CHARPY IMPACT TEST

MATERIAL (SAMPLE ID): STOCK# LNM 4455, LINCOLN LOT 3018926/78309
STOCK# LNM 4455, LINCOLN LOT 3017006/72262

SPECIFICATION: ASTM A 370-03a

SPECIMEN TYPE: "A" Vee Notch

SPECIMEN SIZE: 10 mm x 10 mm (All Weld)

TEMPERATURE OF TEST: 293°K

REQUIREMENTS:

ALL WELD	FOOT LBS.	LATERAL EXPANSION	% SHEAR
78309-7	97	0.074	50
78309-8	96	0.076	50
78309-9	108	0.075	50
Average	100	0.075	50
ALL WELD	FOOT LBS.	LATERAL EXPANSION	% SHEAR
72262-7	126	0.098	50
72262-8	102	0.080	50
72262-9	123	0.087	50
Average	117	0.088	50

Identification of tested specimen provided by client.

KS/tlv


Karl Schmitz, Director
Materials Testing



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Certificate No. 0397-02

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Page 3 of 3

Attention: Chuck Ruud

REPORT OF CHARPY IMPACT TEST

MATERIAL (SAMPLE ID): STOCK# LNM 4455, LINCOLN LOT 3012668/82743
STOCK# B316NF METRODE, W021735

SPECIFICATION: ASTM A 370-03a

SPECIMEN TYPE: "A" Vee Notch

SPECIMEN SIZE: 10 mm x 10 mm (All Weld)

TEMPERATURE OF TEST: 293°K

REQUIREMENTS:

ALL WELD	FOOT LBS.	LATERAL EXPANSION	% SHEAR
82743-7	100	0.082	50
82743-8	99	0.076	50
82743-9	94	0.072	50
Average	98	0.077	50

ALL WELD	FOOT LBS.	LATERAL EXPANSION	% SHEAR
W021735-7	102	0.101	50
W021735-8	88	0.073	50
W021735-9	88	0.080	50
Average	93	0.085	50

Identification of tested specimen provided by client.

KS/tlv


Karl Schmitz, Director
Materials Testing



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Certificate No. 0397-02

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ER316 MNN

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PRODUCT CONFORMANCE REPORT

**LINCOLN®
ELECTRIC**

Product	LNM 4455	Size(s) mm	1,2
Class.	EN 12072-99: G 20 16 3 Mn L	Lot/Batch	3018926/78309
		Item No.	692129
Customer	CK SUPPLY Contact Ernie Simpson Eureka (MISSOURI) 63025 UNITED STATES	Quantity	450,0 KG
		Customer ref.	P.O.: SL 057549
		LSW Order No.	SD424496

Chemical analysis (%) EN10204 3.1B

C	Si	Mn	P	S	Cr	Ni	Mo	Cu	N
0,02	0,4	7,3	0,019	0,001	20,1	16,3	2,9	0,1	0,200

Mechanical tests, all weld metal EN10204

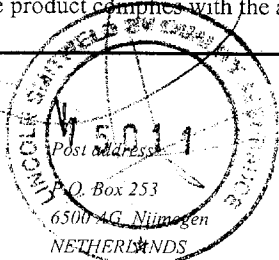
Additional information EN10204

Other tests

Remarks

The product identified above has been manufactured, tested and supplied in compliance with a Quality Assurance Programme that fulfils the requirements of EN 29000/ISO 9000/BS 5750 or similar standard.
We herewith certify that the product complies with the above-mentioned standards.
Certified ISO 9001:2000.

Company	Issued by	Function	Date	Cert.No.
Lincoln Smitweld B.V.	P. van Etteger	QS Manager	10/02/2005	3018926/7830
Registered Office	Telephone:	Fax:		
Nieuwe Dukenburgseweg 20	31 24 3522911	31 24 3522200		
6534 AD NIJMEGEN				



OPER. #	STATION	DESCRIPTION OF PROCESS	Name	Date
10	QUALITY RELEASE	Keep all parts together. Sign and date each step when all 6 parts have been completed. REVIEW AND APPROVE MTS. RECEIVED APPROVAL FROM EIO ON 12-15-04 FROM Pete D. SIGNED QUALITY MANAGER	CAR	12/15/04
20	PATTERN NPAT SOP 0100REV2	APPLY APPROPRIATE PART NUMBER, SERIAL NUMBER, FOUNDRY MARK, TO THE PATTERN.	TRB	4/27/05
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	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.	CR	4/27/05
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: 2825 CASTING POURED AT: 1245 A DATE: 4/28 HEAT #s: 29198 ELAPSED POUR TIME: N/A KEEL BLOCKS POURED: 4/28 Sample from ladle to be analyzed for final chemical analysis and reported on material certifications. Sample Taken by: SL Analyzed: GFW Date: 4/28 Note: Make 15 additional test bars for mechanical testing.	SG	4/28/05
50	MELT SOP 0800R2	SHAKEOUT	CA	4/29
60	ARC RISE SOP 0100R1	REMOVE RISERS AS DIRECTED BY SUPERVISOR.	BGVH	6/16/05
70	HEAT TREAT HEAT SOP 0103R5	SOLUTION ANNEAL. With C-1 Coil.	DLS	4/2/05

80	PHYSICAL TESTING	OBTAIN TEST SPECIMENS AND SUBMIT FOR PHYSICAL TESTING. REPORT RESULTS AS PART OF STEP 480.	WTH	4/26/03
90	GRIND GSWA SOP 0100R3 GCHI SOP 0100R2	SWING GRIND TO REMOVE RISER REMAINS AND FLASH IF REQUIRED. CHIP AND HAD GRIND SURFACE OF PART AS REQUIRED.	4th	8/23/05
100	SAND BLAST BLAS SOP 0100R6	SANDBLAST (REMOVE ALL BLAST MATERIAL FROM CASTING) SANDBLASTING WILL BE DONE USING RECYCLED SHARP ANGULAR AGGREGATE.		AGM 8/23
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 130. IF REJECTED CHECK HERE ____.	VT - LEVEL II QC	8/24
NOTICE	WITNESS NOTIFICATION	PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF LP STEP. EIO NOTIFIED ON <u>7/28</u> DCMA NOTIFIED ON <u>7/28</u>	Q ENG OR QA MGR	PS
120	100% L.P. CQP 0300 REV 10	L.P. 100% OF COMPONENT ACCEPTANCE PER ASTM A903. ACCEPTANCE CRITERIA- LEVEL 2. IF OK CHECK HERE <input checked="" type="checkbox"/> . MARK AND REPAIR AT STEP 120. IF REJECTED CHECK HERE ____.	LP - LEVEL II CC	8/24
130	WELD SOP 0100 REV 7	EXCAVATE ANY DEFECTS FOUND DURING 100% VISUAL AND LP INSPECTION.	N/A	
140	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 2.	LP - LEVEL II	
150	SAND BLAST BLAS SOP 0100R6	SANDBLAST (REMOVE ALL BLAST MATERIAL FROM CASTING) SANDBLASTING WILL BE DONE USING RECYCLED SHARP ANGULAR AGGREGATE.		
160	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.. USE YELLOW MARKER. MUST SEND REPORT ON ALL WELDS OVER 10% OF NOMINAL WALL THICKNESS TO CUSTOMER. DEFECTS > 10% YES _____, REPORT SENT BY _____ DATE _____ DEFECTS < 10% _____ SIGN BY QA ENG.		
NOTICE	WITNESS NOTIFICATION	PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF XRAY AND LAYOUT STEPS. EIO NOTIFIED ON _____ DCMA NOTIFIED ON _____	Q ENG OR QA MGR	

170	CAF X-RAY COP 401 REV 5	X-RAY PER TECHNIQUE: To be determined. 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	8-29-05
180	X-RAY COP 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 310. REJECTED CHECK HERE <input type="checkbox"/> MARK UP DEFECTS AND SEND THE CASTING TO STEP 200.	RT - LEVEL II	8-29-05
190	LAYOUT	INSPECT CASTING TO VERIFY DIMENSIONS. THIS MAY BE PERFORMED BEFORE OR AFTER STEP 180. DIMENSIONED <u>2 1/4</u> DATE <u>8-31-05</u> RELEASED <u>2B</u> (ENGINEER ONLY)	RT - LEVEL II	8-31-05
200	WELD SOP 0100 REV 7	EXCAVATE ANY DEFECTS FOUND DURING RADIOGRAPHY.	RT - LEVEL II	8-29-05
210	L.P. EXCAVATION COP-300 REV 10	L.P. ALL EXCAVATIONS PRIOR TO WELDING TO ENSURE REMOVAL OF DEFECT. ACCEPTANCE PER A903. ACCEPTANCE CRITERIA- LEVEL 2.	LP - LEVEL II	8-29-05
220	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>QA</u> DATE <u>8/29</u> DEFECTS < 10% <input type="checkbox"/> SIGN BY QA ENG. <u>QA</u> DATE <u>8/29</u>	LP - LEVEL II	8-29-05
NOTICE	WITNESS NOTIFICATION	PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF WELD STEP. EIO NOTIFIED ON <u>8/21</u> DCMA NOTIFIED ON <u>8/24</u>	Q ENG OR QA MGR	8-29-05
230	QA APPROVAL HOLD POINT	QA TO APPROVE ELECTRODE PRIOR TO USE. PROCEDURE USED: <u>316LM</u> MATERIAL USED: <u>316LM</u> (LOT #) <u>158309</u> QUALITY ENG. Name: <u>QA</u> Date: <u>8/29</u> (3619924/18309)	Full #	8-29-05
240	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	Full #	8-29-05
250	GRIND GCHI SOP 0100R2	HAND GRIND WELDS.	Full #	8-29-05

8/31/05
8/31/05

260	L.P. WELD COP 0300 REV 10	L.P. WELD REPAIRS ACCEPTANCE PER ASTM A903. ACCEPTANCE CRITERIA-LEVEL 2. 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 QA ENG.	8-29-05
270	REPEAT	REPEAT STEPS 220 TO 260 AS REQUIRED TILL CLEAR THROUGH VISUAL INSPECTION & PENETRANT INSPECTION. DOCUMENT REWORK ON A SUPPLEMENTAL MTS	QA ENG.	
280	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 290. IF REJECTED CHECK HERE _____.	QA ENG.	8/29/05
290	GRIND GCHI SOP 0100R2	GRIND AREAS OF NON COMPLIANCE AND RETURN TO STEP 270. REPEAT UNTILL COMPLIANCE IS ACHIEVED.	RT - LEVEL II QA R	8-29-05
300	CAF X-RAY DEFECTS REPAIRED BY WELDING COP 401 REV 5	X-RAY PER TECHNIQUE: To be determined. 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 QA R	8-29-05
310	X-RAY COP 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 310. REJECTED CHECK HERE _____ MARK UP DEFECTS AND SEND THE CASTING TO STEP 200.	QA ENG. QA R	8-29-05
320	REPEAT	REPEAT STEPS 200 TO 300 AS REQUIRED TILL WELDS CLEAR X-RAY. DOCUMENT REWORK ON A SUPPLEMENTAL MTS	QA ENG. QA R	8-29-05
330	SAND BLAST BLAS SOP 0100R6	SANDBLAST (REMOVE ALL BLAST MATERIAL FROM CASTING) SANDBLASTING WILL BE DONE USING RECYCLED SHARP ANGULAR AGGREGATE.	M	8/31
340	NOTICE	WITNESS NOTIFICATION	Q ENG OR QA MGR	8/31
350	FINAL VISUAL INSPECTION COP-500 REV 4	VISUALLY INSPECT 100% of COMPONENT ACCORDING TO ASTM A802 LEVEL 2 ALL CONDITIONS. IF OK CHECK HERE <input checked="" type="checkbox"/> IF REJECTED CHECK HERE _____ MARK AND REPAIR AT STEP 340.	VT - LEVEL II QA R	8/31

50/31/05
8/31/05
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		MUST BE PERFORMED BY LEVEL II in VT.		
330	FINAL L.P. COP 0300 REV 10	FINAL L.P. 100% OF COMPONENT. ACCEPTANCE PER ASTM A903. ACCEPTANCE CRITERIA- LEVEL I FOR HIGH STRESSED AREAS, LEVEL 2 FOR ALL OTHER AREAS. SEE LP DRAWING. IF OK CHECK HERE <u>✓</u> WASH AND SEND TO STEP 410. IF REJECTED CHECK HERE _____	LP - LEVEL II	<u>OK 8/31</u>
340	WELD SOP 0100 REV 7	EXCAVATE ANY DEFECTS FOUND DURING FINAL PENETRANT INSPECTION.		
350	L.P. EXCAVATION COP-300 REV 10	L.P. ALL EXCAVATIONS PRIOR TO WELDING TO ENSURE REMOVAL OF DEFECT. ACCEPTANCE PER A903.	LP - LEVEL II	<u>OK</u>
370	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 _____ DATE _____ DEFECTS < 10% _____ SIGN BY QA ENG.		
380	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		
390	GRIND GCHI SOP 0100 REV 2	HAND GRIND WELDS.		
400	L.P. WELDS COP 0300 REV 10	L.P. WELD REPAIRS ACCEPTANCE PER ASTM A903. IF OK CHECK HERE _____ WASH AND SEND TO STEP 460. IF REJECTED CHECK HERE _____ AND RETURN TO STEP 390.	LP - LEVEL II	
	REPEAT	REPEAT STEPS 390 TO 410 AS REQUIRED TILL WELDS CLEAR FINAL LIQUID PENETRANT INSPECTION. DOCUMENT REWORK ON A SUPPLEMENTAL MTS	QA ENG.	
410	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 _____ AND GO TO STEP 430.		

420	GRIND GCHI SOP 0100R2	GRIND AREAS OF NON COMPLIANCE AND RETURN TO STEP 420. REPEAT UNTILL COMPLIANCE IS ACHIEVED.		
NOTICE	WITNESS NOTIFICATION	PROVIDE NOTICE TO EIO AND DCMA AT LEAST FIVE DAYS IN ADVANCE OF MAG PERM STEP. EIO NOTIFIED ON <u>8/24</u> DCMA NOTIFIED ON <u>8/24</u>	Q ENG OR QA MGR	<u>Che</u>
430	FINAL MAG PERM INSPECTION SOP MAG PERM 100, REV 1	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 470. IF REJECTED CHECK HERE		<u>Che</u> 8/31
440	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.		<u>B/M</u>
450	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 IF REJECTED CHECK HERE RETURN TO STEP 450		
460	PHOTOGRAPH	TAKE DIGITAL PICTURES.		
470	AUDIT REVIEW	PROCESS DOCUMENT TO PROGRAM MANAGER FOR COMPLIANCE AUDIT.		
480	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)		<u>Che</u> 8/31
NOTICE	RELEASE FROM EIO	PROVIDE DOCUMENTS TO EIO. SENT ON <u>8/31</u> BY <u>Che</u>	Q ENG OR QA MGR	
490	PACK AND SHIP	PACKAGE AND SHIP TO MAJOR TOOL.		
1000	REVISION HISTORY	ORIGINAL 12-14-04.	CARUUD	