

Status	2 - Disposition Needed	Trend	07-Out Of Tolerance
Department	NCSX	Division	WBS 121
Source/Org	FABRICATION, OPERATIONS & MAINTENANCE		
Item Dwg/Part#	SE121-004, R1, Part #6	Procurement #	D-NCSX-FPA-001
RAP#	3268	Job Doc #	D-NCSX-FPA-001
RAP Title	Field Period Assembly Station One		

HoldTag Applied

Nonconforming Condition (include requirement(s) violated):

VVSA Nos. 1, 2, and 3: The following welds exceed allowable magnetic permeability of 1.02 mu per C-Spec 185-01-00 3.2.1.4.6. The weld joint is where the two halves of the Cryostat Interface Mounting Flange weld together which is 316 stainless. There are two welds per mounting flange 1/4" thick, 1/8" wide by 2-1/2" long.

VVSA #1 - Port 12 bottom >1.8 mu to isolated spots 2.0 mu narrow and wide ends
Port 12 top >1.3 mu <1.4 mu.

VVSA #2 - Port 12 bottom - narrow end >1.2 mu <1.3 mu wide end >1.3 mu <1.4 mu.
Port 12 top narrow end >1.8 mu <2.0 mu wide end >1.5 mu <1.6 mu.

VVSA #3 - Port 12 bottom - narrow end >1.3 mu <1.4 mu wide end 1.4 mu to 1.5 mu.
Port 12 top - narrow end >1.5 mu <1.6 mu wide end >1.8 mu <2.0 mu.

Lot Size Recd	0	Sample Size Insp	0	<input type="checkbox"/> Lot Rejected	# Rejected	0
Reported By	Boscoe J	Validated By	Phelps C	Validated Date	12/12/06	

~~Disposition: Rework* ___ Repair* ___ Use As Is* ___ Return To Vendor* ___ Scrap* ___~~

~~For rework or repair of vendor supplied equipments, fill in information below:~~

#Hours	_____	\$Est Labor	_____	\$G&A	_____
\$Material	_____	\$Burden	_____	\$Total	_____
Disposition By	_____	Date	_____	_____	_____
Supervisor's Concur	_____	Date	_____	_____	_____
Eng. Dept. Head Concur	_____	Date	_____	_____	_____
WCO/Other	_____	Date	_____	_____	_____
PQA/QC Mgr Dispos Concur	_____	Date	_____	_____	_____
QC Field Verification By	_____	Date	_____	_____	_____

Distribution

- Cog** M. Viola
- Insp** Boscoe J
- Proj. Doc Control (when closed)
- QC Files
- Malsbury J
- Boscoe J
- J. Edwards
- L. Dudek
- Reiersen W
- Williams M
- Tyrrell M
- Phelps C

Disposition: Rework___ Repair ___ Use As Is___ Return to Vendor___ Scrap___

For rework or repair of vendor supplied equipment, fill in information below:

Hours _____ \$ Est Labor _____ \$ G&A _____
\$ Material _____ \$ Burden _____ \$ Total _____

Disposition by _____

Supervisor's Concurrence _____

Eng. Dept. Head Concurrence _____

Other (i.e., WCO/FPE) Concurrence _____

PQA/QC Mgr Disposition Concurrence _____

QA Field Verification by _____