



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**
REGION IV
1600 EAST LAMAR BOULEVARD
ARLINGTON, TEXAS 76011-4511

October 04, 2024

Frederic Bailly, Vice President
and Chief Nuclear Officer
Southern California Edison Company
San Onofre Nuclear Generating Station
P.O. Box 128
San Clemente, CA 92674-0128

**SUBJECT: SAN ONOFRE NUCLEAR GENERATING STATION – NRC INSPECTION
REPORT 050-00361/2024-005 AND 050-00362/2024-005**

Dear Frederic Bailly:

This letter refers to the U.S. Nuclear Regulatory Commission (NRC) inspection conducted on September 9-12, 2024, at the San Onofre Nuclear Generating Station, Units 2 and 3. The inspectors discussed the results of the inspection with you and members of your staff during the exit meeting on September 12, 2024. The inspection results are documented in the enclosure to this letter.

This inspection examined activities conducted under your license as they relate to public health and safety, the common defense and security, and to confirm compliance with the Commission's rules and regulations, and with the conditions of your licenses. Within these areas, the inspection consisted of selected examination of procedures and representative records, observation of activities, independent measurement of radiation levels, and interviews with personnel. Specifically, the inspectors reviewed your implementation of decommissioning performance; occupational radiation exposure; environmental monitoring program; and the site's corrective action programs. Within the scope of the inspection, no violations were identified, and no response to this letter is required.

In accordance with 10 CFR 2.390 of the NRC's "Agency Rules of Practice and Procedure," a copy of this letter, its enclosure, and your response if you choose to provide one, will be made available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System (ADAMS). ADAMS is accessible from the NRC's Website at <http://www.nrc.gov/reading-rm/adams.html>. To the extent possible, your response should not include any personal privacy or proprietary, information so that it can be made available to the Public without redaction.

If you have any questions regarding this inspection report, please contact Christian Dennes at 817-200-1529 or the undersigned at 817-200-1249.

Sincerely,



Signed by Warnick, Gregory
on 10/04/24

Gregory G. Warnick, Chief
Decommissioning, ISFSI, and Operating
Reactor Branch
Division of Radiological Safety and Security

Docket Nos. 050-00361; 050-00362
License Nos. NPF-10; NPF-15

Enclosure:
Inspection Report 050-00361/2024-005; 050-00362/2024-005
w/Attachment: Supplemental Inspection Information

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**U.S. NUCLEAR REGULATORY COMMISSION
REGION IV**

Docket Nos. 050-00361; 050-00362

License Nos. NPF-10; NPF-15

Report Nos. 050-00361/2024-005; 050-00362/2024-005

Licensee: Southern California Edison Company

Facility: San Onofre Nuclear Generating Station, Units 2, and 3

Location: 5000 South Pacific Coast Highway
San Clemente, California

Dates: September 9-12, 2024

Inspectors: Christian R. Dennes, Health Physicist
Decommissioning, ISFSI, and Operating Reactor Branch
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Decommissioning, ISFSI, and Operating Reactor Branch
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Approved By: Gregory G. Warnick, Chief
Decommissioning, ISFSI, and Operating Reactor Branch
Division of Radiological Safety and Security

Attachment: Supplemental Inspection Information

Enclosure

EXECUTIVE SUMMARY

San Onofre Nuclear Generating Station, Units 2 and 3
NRC Inspection Report 05000361/2024-005; 05000362/2024-005

This U.S. Nuclear Regulatory Commission (NRC) inspection was a routine, announced inspection of decommissioning activities being conducted at San Onofre Nuclear Generating Station, Units 2 and 3. In summary, the licensee and its decommissioning contractor were found to be conducting activities in accordance with site procedures, license requirements, and applicable NRC regulations.

Decommissioning Performance and Status Reviews at Permanently Shutdown Reactors

The licensee and its decommissioning contractor conducted decommissioning activities in accordance with the instructions provided in site procedures and commitments provided in the Post-Shutdown Decommissioning Activities Report. (Section 1.2)

Problem Identification and Resolution at Permanently Shutdown Reactors

The licensee and its decommissioning contractor established and implemented comprehensive corrective action programs to identify, resolve, and prevent conditions adverse to quality. The licensee and its contractor implemented Quality Assurance audit programs in accordance with regulatory and procedural requirements. The licensee and its contractor established and implemented employee concerns programs in accordance with site procedures. (Section 2.2)

Occupational Radiation Exposure at Permanently Shutdown Reactors

The licensee implemented the occupational radiation protection program in accordance with licensee procedures and applicable regulatory requirements. (Section 3.2)

Radioactive Waste Treatment, and Effluent and Environmental Monitoring

In accordance with Post-Shutdown Decommissioning Activities Report commitments, the licensee established procedural and radiological controls for the environmental monitoring program. The inspectors reviewed the licensee's environmental monitoring equipment and observed implementation of sampling procedures; reviewed the licensee's implementation of the Groundwater Protection Initiative program; and reviewed the licensee's implementation of the liquid effluent storage and treatment system. (Section 4.2)

Report Details

Summary of Plant Status

Southern California Edison Company (SCE), the licensee, formally notified the NRC in June 2013 that it had permanently ceased power operations at San Onofre Nuclear Generating Station (SONGS), Units 2 and 3 (Agencywide Documents Access and Management System [ADAMS] Accession No. ML131640201). The NRC subsequently issued the permanently defueled technical specifications in July 2015 (ML15139A390), along with revised facility operating licenses to reflect the permanent cessation of operations at Units 2 and 3.

As required by Title 10 the *Code of Federal Regulations* (10 CFR) 50.82(a)(4), the licensee submitted its Post-Shutdown Decommissioning Activities Report (PSDAR) to the NRC on September 23, 2014 (ML14269A033). The PSDAR outlined the licensee's planned decommissioning activities. The current version of the PSDAR is dated May 7, 2020 (ML20136A339). As discussed in the revised PSDAR, the licensee chose the decommissioning alternative DECON. DECON is the removal or decontamination of equipment, structures, or portions of the facility and site that contain radioactive contaminants to levels that permit termination of the license.

On December 20, 2016, the licensee announced the selection of AECOM and EnergySolutions as the decommissioning general contractor. The joint venture between the two companies was named SONGS Decommissioning Solutions (SDS). The SDS organization manages most of the decommissioning activities as described in the PSDAR.

During the inspection, the inspectors conducted a containment tour of Units 2 and 3, general site area and observed the current decommissioning work in progress. The decommissioning activities in progress included large component removal, control building demolition, and prepping Unit 3 cavity for reactor vessel segmentation.

1 Decommissioning Performance and Status Review at Permanently Shutdown Reactors (Inspection Procedure [IP] 71801)

1.1 Inspection Scope

The inspectors observed site activities, reviewed documents, and interviewed site personnel in order to: (1) evaluate the status of decommissioning and verify whether the licensee was conducting decommissioning and maintenance activities in accordance with regulatory and license requirements; and (2) evaluate the licensee awareness of work activities to assess their control and conduct of decommissioning to ensure that license requirements were met, as applicable to the current decommissioning status.

1.2 Observations and Findings

a. Status of Decommissioning

At the time of the onsite inspection, the licensee and its decommissioning general contractor SDS were conducting major decommissioning activities in accordance with the commitments provided in Section II.B.1 of the PSDAR. The inspectors discussed the current decommissioning schedule with management staff, observed daily planning

meetings, and conducted site tours to observe work in progress. The inspectors observed that good industrial safety controls were in place. In summary, the inspectors concluded that the licensee was effectively implementing decommissioning activities and planning for future demolition activities in accordance with the commitments provided in the PSDAR.

b. Decommissioning Operations

The inspectors toured the Unit 2 and 3 containments. During the tours, the inspectors evaluated general housekeeping, performed independent radiation surveys, and observed the cleanup of the Unit 2 reactor cavity. Housekeeping within both containments showed continued improvement over past inspections. The inspectors' independent surveys validated radiological areas and radioactive material were posted as required. The radiological controls implemented at the control points and during the cleanup of the Unit 2 reactor cavity work were consistent with regulatory requirements and site procedures. The reactor vessel cavity cleanup work was conducted in accordance with an approved work package and licensee procedure.

The inspectors toured the general areas external of Unit 2 and 3 containments. The areas and work observed included the material handling facility (MHF), the Unit 2 and 3 pressurizers, the radioactive material storage areas, and the demolition of the control buildings. The operation of the MHF was performed in accordance with licensee procedures and adequate radiological controls were in place during movement of potentially contaminated demolition rubble. The pressurizers were staged on rail cars and marked and posted in accordance with 10 CFR Part 20 regulations. Inspectors' surveys validated posted radiation levels were accurate, and barriers were correctly located. The radioactive material storage areas were bounded and posted clearly. Radioactive material stored in these areas were marked in accordance with licensee procedures and 10 CFR Part 20 regulations. The contaminated sections of the control building were being demolished during this inspection. The inspectors observed good industrial safety controls, correct use of radioactive protective clothing, and use of water cannons to suppress dust created by demolition activities.

c. Decommissioning Planning

The inspectors reviewed SDS Decommissioning and Decontamination (D&D) Critical Path, SDS D&D Secondary Critical Path, and SDS D&D Level I Summary with the SDS Project Executive Sponsor. Based on the discussions and review of the licensee's decommissioning strategy and schedule, the inspectors determined there were no major changes to the decommissioning scheduling.

1.3 Conclusion

The licensee and its decommissioning contractor were conducting decommissioning activities in accordance with the instructions provided in site procedures and commitments provided in the PSDAR.

2 Problem Identification and Resolution at Permanently Shutdown Reactors (IP 40801)

2.1 Inspection Scope

To evaluate the effectiveness of licensee controls in identifying, resolving, and correcting issues in accordance with the quality assurance (QA) program and 10 CFR Part 50, Appendix B requirements. To determine whether audits and assessments were conducted in accordance with the QA program and regulatory requirements. To confirm that the licensee has established, implemented, and performed management reviews of the safety-conscious work environment.

2.2 Observations and Findings

a. Corrective Action Programs

Corrective action programs are required by 10 CFR Part 50, Appendix B, Criterion VXI and Section 16 of the licensee's Decommissioning Quality Assurance Program (DQAP), revision 11, and SDS's Quality Assurance Program (QAP), procedure SDS-QA1-PGM-0001, revision 5. The two QA plans were assessed for effectiveness at reasonably preventing problems and promptly detecting and correcting issues of concerns, conditions adverse to quality, and non-conformances. The review included attendance at a licensee's corrective action review meeting.

The inspectors reviewed the details of the licensee's corrective action program in procedure ADM-5, "Corrective Action Program," revision 6. Details of the contractor's program were provided in procedure SDS-RA1-PGM-0005, "SDS Corrective Action Program (CAP)," revision 10. The inspectors attended screening committee meetings, which were conducted to review problems that have been identified and corrective actions with a focus on preventing reoccurrence. Additionally, the inspectors interviewed both CAP managers about program trends, challenges faced, management engagement, and future for improvement and development items or plans.

The inspectors reviewed selected corrective action reports issued since the last inspection of this program area. The inspectors focused their review on the two recent Apparent Cause Evaluations (ACE) completed for the Unit 2 pressurizer leaking issue. Both the licensee's and decommissioning contractor's ACE were performed in accordance with site procedures. The contractor's ACE determined that the apparent cause was due to the process for verifying no liquid content, was not sufficiently established in SDS D&D or Waste Management processes at the time of the design work package development in 2021 which resulted in the internal verification inspection not being performed in 2023 prior to sealing the Unit 2 pressurizer. A thorough evaluation was conducted which identified extent of conditions taken to prevent reoccurrence in the future, as well as nine corrective actions. The licensee's ACE determined that the apparent cause was insufficient SDS Decom and Energy Solutions Waste Leader engagement, with project management skills, requisite knowledge, and single point accountability, to ensure critical steps in pressurizer packaging and shipping were known to stakeholders and fully acted upon. Licensee management issued a stop work that halted the shipment until they had confidence that the actions taken by SDS and Energy Solutions Waste Management will ensure the packaging and shipping of the Unit 2 and 3 pressurizers meet regulatory requirements. As of September 12, 2024, SDS had not re-shipped the pressurizers offsite for permanent disposal.

b. Quality Assurance Audit Programs

Quality assurance audits are required by 10 CFR Part 50, Appendix B, Criterion XVIII. The instructions for the audits were provided in Section 18 of the licensee's DQAP and the SDS QAP. Details of the programs are provided in licensee procedure NOD-2, "Audit and Assessment Program," revision 7, and SDS procedure SDS-QA1-PCD-0011, "Audit and Surveillance," revision 8. The inspectors reviewed the audits and assessments to verify that the audits were being performed consistent with the schedule outlined in the QA program plan.

The inspectors interviewed the SDS and SCE QA managers as well as reviewed documents that demonstrate compliance with 10 CFR Part 50, Appendix B, Criterion XVIII. Both the licensee and its decommissioning contractor maintain a robust and regularly scheduled audit and surveillance program. The licensee regularly questions and investigates the findings identified by the contractor. Both programs have regular third-party audits of their programs.

c. Safety Conscious Work Environment

The NRC's Regulatory Issue Summary 2005-18 provides the guidance for establishing and maintaining a safety-conscious work environment. In support of positive nuclear safety cultures, both the licensee and SDS had established employee concerns programs. The licensee's program was described in procedure ADM-2, "Decommissioning Employee Concerns Program," revision 3, and SDS's program was described in procedure SDS-RA1-PGM-0004, "Employee Concerns," revision 2.

The inspectors conducted separate interviews of the Employee Concern Program managers for both the licensee and the decommissioning contractor. Both program managers were engaged with the work force and had regular as well as meaningful interactions with management.

2.3 Conclusion

The licensee and its decommissioning general contractor established and implemented comprehensive corrective action programs to identify, resolve, and prevent conditions adverse to quality. The licensee and its contractor implemented QA audit programs in accordance with regulatory and procedural requirements. The licensee and its contractor established and implemented employee concerns programs in accordance with site procedures.

3 Occupational Radiation Exposure at Permanently Shutdown Reactors (IP 83750)

3.1 Inspection Scope

To ensure adequate protection of worker health and safety from exposure to radiation or radioactive material and to evaluate whether the licensee adequately identified problems and implemented appropriate and timely corrective actions related to occupational radiation safety.

3.2 Observations and Findings

a. Radiological Work Planning and Observations

Section II of the PSDAR states, in part, that appropriate radiological programs will be maintained throughout the decommissioning process to ensure radiological safety of the workforce is maintained. The licensee and its decommissioning contractor established and implemented radiological programs as required by 10 CFR Part 20.1101(a) and the PSDAR.

The inspectors performed tours of all areas with radiological work in progress and areas where radioactive materials were stored. Contractor procedure SDS-RP1-PCD-1005, "Radiological Postings and Controls," revision 16, described the licensee posting requirements. The inspectors conducted independent radiological surveys during site tours using a Thermo Scientific RadEye G survey meter (serial number 30901, calibration due date of 1/19/25, calibrated to Cesium-137), within both containments and outside the containments in the general site areas. The inspectors' tours and procedure reviews validated radiological boundaries were properly posted to control access to radiation and high radiation areas. During the site tours, the inspectors also observed radioactive material stored both inside and outside containments to validate it was correctly marked and labeled to ensure nearby personnel were informed of the exposure levels and material labeled in accordance with the licensee procedure. With only minor exceptions, radioactive material was marked and labeled in accordance with 10 CFR 20 and procedure SDS-RP1-PCD-1002, "Radioactive Material Container Labeling," revision 5.

During the inspectors' observation of the Unit 3 reactor vessel segmentation preparation work, the inspectors validated the following: all personnel wore required dosimetry; Radiation Protection (RP) personnel were present to provide oversight and perform radiation surveys when appropriate; air samplers and powered air purifying respirators were in use during work.

The inspectors reviewed records for daily radiological survey records performed following open-air demolition (OAD). Open-air demolition surveys were performed in accordance with licensee procedures and survey records were retained as required.

b. Training

The inspectors reviewed the radiological training program. Areas of training reviewed included the administration of initial radiological worker training; maintenance of training records for workers, visitors, and RP technicians; and methods to ensure refresher training was completed prior to expiration. The training manager ensured training was maintained up to date by providing weekly notifications to supervisors on upcoming training expiration dates. The licensee utilized an electronic training record system that was integrated with the site's radiological access system to ensure personnel with expired training were denied access to radiologically controlled areas. The inspectors validated training was current for a sampling of licensee managers, contractors, and trades personnel. No discrepancies were noted during this review. The licensee's training program was adequate to ensure personnel performing radiological work were aware of radiological risks and qualified to perform the work.

c. Dosimetry

The inspectors reviewed external and internal dosimetry program. The dosimetry manager provided records to validate personnel were monitored when required and exposure reports were documented and retained. The inspectors reviewed procedure SDS-RP3-PCD-1002, "Internal Dose Assessment," revision 9. The licensee procedures were adequate, and the dosimetry manager's description of bioassay sampling was in accordance with the licensee procedure. No recent records of bioassays were available for review as the licensee was not required to perform bioassays during the past 12 months.

d. Special Dosimetric Situations

The inspectors reviewed records of special dosimetric situations to evaluate how the licensee assigned dose of records for total effective dose equivalent, shallow dose equivalent, and lens dose equivalent. The licensee had documented two declared pregnancies in the past 12 months. The inspectors reviewed procedure SDS-RP3-PCD-1004, "Declared Pregnant Woman Exposure Control," revision 4, to validate the licensee monitoring program was in accordance with 10 CFR Part 20.1208 and 20.2106. The inspectors determined that the licensee is adequately following procedures and regulations to ensure personnel do not exceed dose limits.

e. Problem Identification and Resolution

The inspectors reviewed recently issued corrective action reports in this program area. The topics identified included higher than expected Thermoluminescence Dosimetry (TLD) returns and personnel electronic dosimeter (PED) dose rate alarm investigations.

Condition Report (CR) SDS-001939 described "a cognitive trend of TLD readings returned from vendor being higher than electronic dosimeter estimated dose." The CR indicated that the licensee would perform an evaluation to identify RP improvement areas. The above cognitive trend is not a regulatory violation, but it was a condition requiring improvement.

Condition Report CR SDS-001860 described PED dose rate alarms which occurred during reactor vessel internals activities. The licensee conducted prompt investigations following the PED alarms, determined the alarms to be valid, and determined the personnel doses did not exceed regulatory limits. The licensee's review of the alarmed PED's histograms verified that personnel correctly responded to the alarms by distancing themselves from sources of higher exposure after the alarm. For each problem identified above, the licensee RP managers ensured prompt evaluations were performed.

Review of the licensee's problem identification and resolution programs determined that the licensee has adequately identified, documented, and resolved deficient conditions in the area of occupational radiation exposure.

3.3 Conclusion

The licensee implemented the occupational radiation protection program in accordance with licensee procedures and applicable regulatory requirements.

4 Radioactive Waste Treatment, and Effluent and Environmental Monitoring (IP 84750)

4.1 Inspection Scope

The inspectors observed site activities, reviewed documents, and interviewed site personnel to ensure that: (1) radioactive effluent sampling and analysis requirements were being satisfied so that discharges of radioactive materials were adequately quantified and evaluated; (2) radiological environmental monitoring programs were effectively implemented; and (3) the voluntary Groundwater Protection Initiative program was being implemented as specified in the PSDAR.

4.2 Observations and Findings

a. Radiological Environmental Monitoring Program (REMP)

The inspectors conducted a review of the environmental monitoring program which included field observations of equipment and procedures and review of records associated with the program. The inspectors reviewed procedure SDS-CH2-PCD-1014, "Annual and Semiannual REMP Sampling," revision 4, the Offsite Dose Calculations Manual (ODCM), Process Control Program, and Radwaste System Design and Operation. There were no changes to these documents since the last inspection. The inspectors reviewed and observed the operation of both REMP and OAD air monitoring stations located within the owner-controlled area. The inspectors did not identify any deficiencies in the implementation of the operating procedure and the air samplers were in proper working order at the time of the inspection.

b. Liquid Effluent Storage and Treatment System

Section II of the PSDAR states that appropriate radiological and environmental programs will be maintained throughout the decommissioning process to ensure radiological safety of the workforce and the public, and environmental compliance will be maintained. As part of the decommissioning process, the licensee planned to drain down the two reactor cavities. At the time of this inspection, the Unit 3 cavity drain was completed, the contaminated water was transferred to onsite tanks, cleaned, and then discharged in accordance with the instructions provided in the ODCM. The inspectors reviewed the licensee's operational procedures and discharge permits to validate the liquid effluent discharges were conducted and documented in accordance with established procedures.

c. Groundwater Protection Initiative

In accordance with the PSDAR the licensee has implemented a groundwater protection program. The program is conducted in accordance with NEI 07-07, "Industry Groundwater Protection Initiative, Final Guidance Document."

During Calendar Year 2024, quarterly groundwater sampling at well PA-2 identified increased levels of tritium. Although the tritium levels did not exceed NRC and Environmental Protection Agency limits, the licensee reported their findings to the NRC in event notification number 57305 and documented the event in SCE Action Request

No. 0624-51520. In response to the increased tritium levels, the licensee increased the frequency of sampling at well PA-2 and increased the number of wells sampled. The licensee has also contracted a hydrogeologist to assist with identifying the tritium's source and the extent of the groundwater spread.

The inspectors observed the collection of ground water samples from two monitoring wells. The samples were taken in accordance with procedure SDS-CH2-PCD-1009, "Groundwater Monitoring," revision 8. The licensee's analysis of the groundwater samples collected during this inspection indicated a decrease in groundwater tritium since the last sampling. The inspectors did not identify any significant deficiencies in the licensee's implementation of the Groundwater Protection Initiative program.

d. Problem Identification and Resolution

The inspectors reviewed the status of the corrective action programs for entries involving radioactive waste treatment, and effluent and environmental monitoring. The licensee and contractor appeared to be effectively writing condition reports to address problems as they occur with corresponding corrective actions developed and implemented with a focus on preventing reoccurrence.

4.3 Conclusion

In accordance with PSDAR commitments, the licensee established procedural and radiological controls for the environmental monitoring program. The inspectors reviewed the licensee's environmental monitoring equipment and observed implementation of sampling procedures; reviewed the licensee's implementation of the Groundwater Protection Initiative program; and reviewed the licensee's implementation of the liquid effluent storage and treatment system.

5 Exit Meeting Summary

The inspectors presented the final inspection results to the Chief Nuclear Officer/Vice President Decommissioning and other members of the licensee's staff on September 12, 2024. The inspectors asked the licensee whether any materials examined during the inspection should be considered proprietary. No proprietary information was identified.

SUPPLEMENTAL INSPECTION INFORMATION

KEY POINTS OF CONTACT

Licensee and Contractor Personnel

F. Bailly, SCE, Vice President and Chief Nuclear Officer
G. Ferrigno, SDS, Radiation Protection Manager
S. Fuller, SDS, Safety Manager
R. Kalman, SDS, Executive Sponsor
D. Knudson, SDS, Programs Manager
J. Madigan, SCE, Nuclear Oversight and Safety Culture Manager
S. Mannon, SDS, Programs Project Director/Regulatory Manager
M. Morgan, SCE, Manager, Regulatory Affairs
L. Rafner, SCE, Regulatory Affairs
S. Sewell, SCE, Manager, Radiation Protection and Waste

INSPECTION PROCEDURES USED

IP 71801	Decommissioning Performance and Status Reviews at Permanently Shutdown Reactors
IP 40801	Problem Identification and Resolution at Permanently Shutdown Reactors
IP 83750	Occupational Radiation Exposure at Permanently Shutdown Reactors
IP 84750	Radioactive Waste Treatment, and Effluent and Environmental Monitoring

LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

Opened

None

Closed

None

Discussed

None

LIST OF ACRONYMS

ACE	Apparent Cause Evaluation
ADAMS	Agencywide Documents Access and Management System
AR	Action Request
CAP	Corrective Action Program
CFR	Code of Federal Regulations
CR	Condition Report
D&D	Decommissioning and Decontamination
DQAP	Decommissioning Quality Assurance Program
IP	Inspection Procedure
MHF	Material Handling Facility
NRC	Nuclear Regulatory Commission
OAD	Open Air Demolition
PED	Personnel Electronic Dosimeter
PSDAR	Post Shutdown Decommissioning Activities Report
QA	Quality Assurance
QAP	Quality Assurance Program
REMP	Radiological Environmental Monitoring Program
RP	Radiation Protection
SCE	Southern California Edison Company
SDS	SONGS Decommissioning Solutions
SONGS	San Onofre Nuclear Generating Station
TLD	Thermoluminescent Dosimetry