

START

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ENGINEERING CHANGE NOTICE

Page 1 of 2

1. ECN 169884

Proj. ECN

| | | | |
|--------------------------------------|---|-------------------------------------|---------------------------------------|
| 2. ECN Category (mark one) | Supplemental <input checked="" type="checkbox"/> | Change ECN <input type="checkbox"/> | Supersedeure <input type="checkbox"/> |
| Cancel/Void <input type="checkbox"/> | Direct Revision <input checked="" type="checkbox"/> | Temporary <input type="checkbox"/> | Discovery <input type="checkbox"/> |

| | | |
|---|---------------|----------------|
| 3. Originator's Name, Organization, MSIN, and Telephone No. | 6B261 | 4. Date |
| L. C. Swanson, Hydrology Section H5-29 | 6-1438 W81231 | March 17, 1992 |

| | | |
|-------------------------------------|------------------------|-----------------|
| 5. Project Title/No./Work Order No. | 6. Bldg./Sys./Fac. No. | 7. Impact Level |
| 300-FF-5 Operable Unit PC2AA | 4-7 Cluster Sites | 3 |

| | | |
|--|-----------------------|--------------------|
| 8. Document Number Affected (include rev. and sheet no.) | 9. Related ECN No(s). | 10. Related PO No. |
| WHC-SD-FN-AP-077, Rev 0 | N/A | N/A |

| | | | |
|---|----------------------------|---------------------------------|--|
| 11a. Modification Work | 11b. Work Package Doc. No. | 11c. Complete Installation Work | 11d. Complete Restoration (Temp. ECN only) |
| <input type="checkbox"/> Yes (fill out Blk. 11b) | N/A | N/A | N/A |
| <input checked="" type="checkbox"/> No (NA Blks. 11b, 11c, 11d) | | Cog. Engineer Signature & Date | Cog. Engineer Signature & Date |

12. Description of Change

- Table 3. Change the accuracy value for transducers to "+-0.5% of full scale". *CK 3/17/92*
- Section 5.2.1. Delete parenthetical statement in second sentence ~~at sentence~~ "(every 1 to 2 hr initially)". Insert another sentence at the end of the second sentence, "The frequency will be determined by the Site Hydrologist."



| | | | |
|--|---|--|--|
| 13a. Justification (mark one) | Criteria Change <input type="checkbox"/> | Environmental <input type="checkbox"/> | Facilitate Const. <input type="checkbox"/> |
| Design Error/Omission <input type="checkbox"/> | Design Improvement <input type="checkbox"/> | As-Found <input checked="" type="checkbox"/> | Const. Error/Omission <input type="checkbox"/> |

13b. Justification Details

- The transducers and data loggers are calibrated to 0.5% and not 0.2%. This change accurately reflects the calibration standards requirement.
- Well access problems, and other backup systems are an important control on frequency of E-tape requirements. This change allows the Site Hydrologist to account for field conditions such as accessibility limitations.

| | |
|--|--|
| 14. Distribution (include name, MSIN, and no. of copies) | RELEASE STAMP |
| See attached | OFFICIAL RELEASE BY WHC DATE MAR 18 1992 <i>Sta. 21</i> |

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ENGINEERING CHANGE NOTICE

| | | | | |
|--|--|--|--------------------------------------|--|
| 15. Design Verification Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 16. Cost Impact | | 17. Schedule Impact (days) | |
| | ENGINEERING | | CONSTRUCTION | |
| | Additional <input type="checkbox"/> \$ | Additional <input type="checkbox"/> \$ | Improvement <input type="checkbox"/> | |
| | Savings <input type="checkbox"/> \$ | Savings <input type="checkbox"/> \$ | Delay <input type="checkbox"/> | |

18. Change Impact Review: Indicate the related documents (other than the engineering documents identified on Side 1) that will be affected by the change described in Block 12. Enter the affected document number in Block 19.

| | | | | | |
|--------------------------------|--------------------------|----------------------------------|--------------------------|-------------------------------|--------------------------|
| SDD/DD | <input type="checkbox"/> | Seismic/Stress Analysis | <input type="checkbox"/> | Tank Calibration Manual | <input type="checkbox"/> |
| Functional Design Criteria | <input type="checkbox"/> | Stress/Design Report | <input type="checkbox"/> | Health Physics Procedure | <input type="checkbox"/> |
| Operating Specification | <input type="checkbox"/> | Interface Control Drawing | <input type="checkbox"/> | Spares Multiple Unit Listing | <input type="checkbox"/> |
| Criticality Specification | <input type="checkbox"/> | Calibration Procedure | <input type="checkbox"/> | Test Procedures/Specification | <input type="checkbox"/> |
| Conceptual Design Report | <input type="checkbox"/> | Installation Procedure | <input type="checkbox"/> | Component Index | <input type="checkbox"/> |
| Equipment Spec. | <input type="checkbox"/> | Maintenance Procedure | <input type="checkbox"/> | ASME Coded Item | <input type="checkbox"/> |
| Const. Spec. | <input type="checkbox"/> | Engineering Procedure | <input type="checkbox"/> | Human Factor Consideration | <input type="checkbox"/> |
| Procurement Spec. | <input type="checkbox"/> | Operating Instruction | <input type="checkbox"/> | Computer Software | <input type="checkbox"/> |
| Vendor Information | <input type="checkbox"/> | Operating Procedure | <input type="checkbox"/> | Electric Circuit Schedule | <input type="checkbox"/> |
| OM Manual | <input type="checkbox"/> | Operational Safety Requirement | <input type="checkbox"/> | ICRS Procedure | <input type="checkbox"/> |
| FSAR/SAR | <input type="checkbox"/> | IEFD Drawing | <input type="checkbox"/> | Process Control Manual/Plan | <input type="checkbox"/> |
| Safety Equipment List | <input type="checkbox"/> | Cell Arrangement Drawing | <input type="checkbox"/> | Process Flow Chart | <input type="checkbox"/> |
| Radiation Work Permit | <input type="checkbox"/> | Essential Material Specification | <input type="checkbox"/> | Purchase Requisition | <input type="checkbox"/> |
| Environmental Impact Statement | <input type="checkbox"/> | Fac. Proc. Samp. Schedule | <input type="checkbox"/> | | |
| Environmental Report | <input type="checkbox"/> | Inspection Plan | <input type="checkbox"/> | | |
| Environmental Permit | <input type="checkbox"/> | Inventory Adjustment Request | <input type="checkbox"/> | | |

19. Other Affected Documents: (NOTE: Documents listed below will not be revised by this ECN.) Signatures below indicate that the signing organization has been notified of other affected documents listed below.

Document Number/Revision Document Number/Revision Document Number Revision

20. Approvals

| Signature | Date | Signature | Date |
|---|----------------|----------------------|-------|
| OPERATIONS AND ENGINEERING | | ARCHITECT-ENGINEER | |
| Cog./Project Engineer L. C. Swanson <i>LC Swanson</i> | <u>3/17/92</u> | PE | _____ |
| Cog./Project Engr. Mgr. A. J. Knepp <i>AJK</i> | <u>3/17/92</u> | QA | _____ |
| QA J. R. McCallum <i>JRM</i> | <u>3-17-92</u> | Safety | _____ |
| Safety | _____ | Design | _____ |
| Security | _____ | Other | _____ |
| Proj. Prog./Dept. Mgr. | _____ | | _____ |
| Def. React. Div. | _____ | | _____ |
| Chem. Proc. Div. | _____ | | _____ |
| Def. Wst. Mgmt. Div. | _____ | DEPARTMENT OF ENERGY | _____ |
| Adv. React. Dev. Div. | _____ | | _____ |
| Proj. Dept. | _____ | | _____ |
| Environ. Div. L. C. Hulstrom <i>LC Hulstrom</i> | <u>3/17/92</u> | ADDITIONAL | _____ |
| IRM Dept. | _____ | | _____ |
| Facility Rep. (Ops.) | _____ | | _____ |
| Other E. M. Greager <i>EM Greager</i> | <u>3/17/92</u> | | _____ |
| | | | _____ |
| | | | _____ |

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INFORMATION RELEASE REQUEST

References:
UHC-CM-3-6

COMPLETE FOR ALL TYPES OF RELEASE

| | | |
|--|---|---|
| <input type="checkbox"/> Speech or Presentation <input type="checkbox"/> Full Paper (Check only one suffix) <input type="checkbox"/> Summary <input type="checkbox"/> Abstract <input type="checkbox"/> Visual Aid <input type="checkbox"/> Speakers Bureau <input type="checkbox"/> Poster Session <input type="checkbox"/> Videotape | <input type="checkbox"/> Reference <input type="checkbox"/> Technical Report <input type="checkbox"/> Thesis or Dissertation <input type="checkbox"/> Manual <input type="checkbox"/> Brochure/Flier <input type="checkbox"/> Software/Database <input type="checkbox"/> Controlled Database <input checked="" type="checkbox"/> Other ECN 169884 | New ID Number <p style="text-align: center; font-size: 1.2em;">ECN 169884</p> Existing ID Numbers (include revision, volume, etc.) <p style="text-align: center;">NA</p> If previously cleared, list ID number <p style="text-align: center;">WHC-SD-EN-AP-077, Rev. 0</p> Date Release Required <p style="text-align: center;">3/20/92</p> |
|--|---|---|

| | | |
|--|---------------------------------|-------------------|
| Title Hydrologic Test Plan for 300-FF-5 Operable Unit Cluster Test Sites 4 and 7 | Unclassified Category UC- NA | Impact Level 4 |
|--|---------------------------------|-------------------|

COMPLETE FOR SPEECH OR PRESENTATION

| | | |
|--|-----------------------------------|--|
| Title of Journal NA | Group or Society Sponsoring NA | |
| Date(s) of Conference or Meeting NA | City/State NA | Will proceedings be published? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Will material be handed out? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Title of Conference or Meeting NA | | |

CHECKLIST FOR SIGNATORIES

| Review Required per UHC-CM-3-6 | Yes | No | Reviewer |
|---|-------------------------------------|-------------------------------------|---|
| | | | Name (printed) Signature Date |
| Classification/Unclassified Controlled Nuclear Information | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Patent - General Counsel | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | per telecon with S. Beglin - Jaye Stone 3/18/92 |
| Legal - General Counsel | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Applied Technology/Export Controlled Information or International Program | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| WHC Program | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Communications | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| DOE-RL Program | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Publication Services | <input checked="" type="checkbox"/> | <input type="checkbox"/> | D. E. Smith <i>DE Smith</i> 3/18/92 |
| Other Program | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| References Available to Intended Audience | <input checked="" type="checkbox"/> | <input type="checkbox"/> | L. C. Swanson <i>LC Swanson</i> 3/18/92 |
| Transmit to DOE-HQ/Office of Scientific and Technical Information | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Information conforms to all applicable requirements. The above information is certified to be correct.

| | |
|--|-----------------|
| Author/Requestor (Printed/Signature) L. C. Swanson <i>LC Swanson</i> | Date 3/18/92 |
| Responsible Manager (Printed/Signature) R. A. Carlson <i>R.A. Carlson</i> | Date 3/18/92 |
| Intended Audience <input type="checkbox"/> Internal <input type="checkbox"/> Sponsor <input checked="" type="checkbox"/> External | |

INFORMATION RELEASE ADMINISTRATION APPROVAL STAMP

Stamp is required before release. Release is contingent upon resolution of mandatory comments.



Date Received 3/18/92
ML6

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DISTRIBUTION SHEET

To:
Distribution

From:
L. C. Swanson, Geosciences

Date:
3/18/92

Project Title/Work Order:

Hydrologic Test Plan for 300-FF-5 Operable Uni Cluster Test Sites 4 and 7

EDT No.:

ECN No.: 169884

| Name | MSIN | With Attachment | EDT/ECN & Comment | EDT/ECN Only |
|-------------------|-------|-----------------|-------------------|--------------|
| E. M. Greager | L6-60 | X | | |
| L. C. Hulstrom | H4-55 | X | | |
| A. J. Knepp | H4-56 | X | | |
| J. R. McCallum | H4-16 | X | | |
| K. R. Simpson | H5-29 | X | | |
| L. C. Swanson (5) | H5-29 | X | | |
| EDMC (2) | H4-22 | X | | |
| IRA Clearance | H4-17 | X | | |

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