



Department of Energy
Carlsbad Field Office
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Hazardous Waste Bureau

Mr. John E. Kieling, Chief
Hazardous Waste Bureau
New Mexico Environment Department
2905 Rodeo Park Drive East, Bldg. 1
Santa Fe, New Mexico 87505-6303

Subject: Transmittal of the Final Audit Report for LANL/CCP Recertification Audit A-13-23

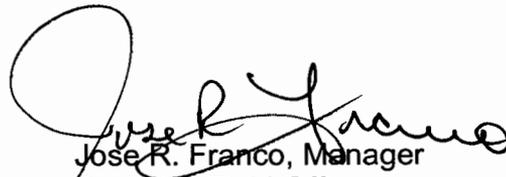
Dear Mr. Kieling:

This letter transmits the Final Audit Report for Carlsbad Field Office (CBFO) Audit A-13-23 of the Los Alamos National Laboratory Central Characterization Program (LANL/CCP) performing characterization and certification activities as required by Part 2, Section 2.3.2.3 of the Waste Isolation Pilot Plant (WIPP) Hazardous Waste Facility Permit. The audit was conducted on July 23-25, 2013. The report contains the results of the audit performed for recertification of contact-handled Summary Category Groups S3000 homogeneous solids waste, S4000 soils/gravel waste, and S5000 debris waste.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

If you have any questions, please contact Mr. Oba L. Vincent, Acting Director, Office of Quality Assurance, at (575) 234-7525.

Sincerely,


Jose R. Franco, Manager
Carlsbad Field Office

Enclosure

SCANNED



Mr. John E. Kieling

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cc: w/Report Narrative

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WIPP Operating Record	
CBFO QA File	
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U.S. DEPARTMENT OF ENERGY
CARLSBAD FIELD OFFICE

FINAL AUDIT REPORT

OF THE

LOS ALAMOS NATIONAL LABORATORY
CENTRAL CHARACTERIZATION PROGRAM

LOS ALAMOS, NEW MEXICO

AUDIT NUMBER A-13-23

July 23 – 25, 2013

TRU WASTE CHARACTERIZATION AND CERTIFICATION



Prepared by:

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Berry D. Pace, CTAC
Audit Team Leader

Date:

10/29/13

Approved by:

Oba Vincent
Oba Vincent, CBFO
Acting Quality Assurance Director

Date:

10/29/13

1.0 EXECUTIVE SUMMARY

Carlsbad Field Office (CBFO) Audit A-13-23 was conducted to evaluate the continued adequacy, implementation, and effectiveness of established programs for transuranic (TRU) waste characterization activities performed for the Los Alamos National Laboratory (LANL) by the Nuclear Waste Partnership LLC (NWP) Central Characterization Program (CCP). The audit team evaluated the programs, procedures and processes for characterizing and transporting contact-handled (CH) Summary Category Group (SCG) S3000 homogeneous solids, SCG S4000 soils/gravel, and SCG S5000 debris wastes. The audit was conducted relative to the requirements of the Waste Isolation Pilot Plant (WIPP) Hazardous Waste Facility Permit (Permit) and the *CBFO Quality Assurance Program Document (QAPD)*.

Audit activities were conducted at LANL facilities in Los Alamos, NM, and at the Skeen-Whitlock Building in Carlsbad, NM, July 23 – 25, 2013. Overall, the audit team concluded that the LANL/CCP technical and quality assurance (QA) programs evaluated were adequately established for compliance with applicable upper-tier requirements, effectively implemented, and successful in achieving the desired results.

The audit team identified four concerns during the audit as described in the interim audit report. No Permit Waste Analysis Plan (WAP)-related conditions adverse to quality were identified.

2.0 SCOPE AND PURPOSE

2.1 Scope

The following general areas were audited, as required by Attachment C6, Section C6-3 of the WAP:

- Results of previous audits
- Changes in programs or operations
- New programs or activities being implemented
- Changes in key personnel

The following WAP-related QA elements were audited:

- Personnel Qualification and Training
- Nonconformances
- Records

The following WAP-related waste characterization technical elements were audited for CH SCG S3000 homogeneous solids, SCG S4000 soils/gravel and SCG S5000 debris wastes:

- Acceptable Knowledge (AK), including waste certification (i.e., Waste Stream Profile Forms)
- Project-Level Data Validation and Verification (V&V)
- Solids Sampling and Analysis (SS&A)
- Headspace Gas Sampling and Analysis (HSG S&A)
- Real-time Radiography (RTR)
- Visual Examination (VE)
- WIPP Waste Information System/Waste Data System (WWIS/WDS)

Evaluation of adequacy of LANL/CCP documents was based on the current revisions of the following documents:

- *CBFO Quality Assurance Program Document*, DOE/CBFO-94-1012
- Waste Isolation Pilot Plant Hazardous Waste Facility Permit NM4890139088-TSDF

Programmatic and technical checklists were developed from the current revisions of the following documents:

- *CCP Transuranic Waste Characterization Quality Assurance Project Plan (QAPjP)*, CCP-PO-001
- Related LANL/CCP technical and QA implementing procedures

For the purpose of reporting the results of this audit, in an agreement reached with the New Mexico Environment Department (NMED) (reference CBFO memorandum CBFO:OQA:DSM:MAG:13-1431 dated May 30, 2013), the audit team used C6 checklists dated May 8, 2012, and March 13, 2013, to ensure that the requirements and activities associated with chemical sampling and analysis were appropriately evaluated, since those activities had been conducted at LANL between the dates of the last recertification audit (A-12-12) and the elimination of chemical sampling and analysis in the Permit Modification issued March 13, 2013. That is, the C6 checklists dated May 8, 2012, were used to evaluate chemical sampling and analysis activities performed subsequent to the last recertification audit (A-12-12) through March 13, 2013, and the C6 checklists dated March 13, 2013, were used to evaluate activities not associated with chemical sampling and analysis. To ensure clarity, this report identifies where the May 8, 2012, version of the C6 checklist was used.

2.2 Purpose

Audit A-13-23 was conducted to assess the continued adequacy and implementation of requirements for LANL/CCP waste characterization activities for the certification of CH SCG S3000 homogeneous solids, SCG S4000 soils/gravel and SCG S5000 debris waste for compliance to WAP requirements. The audit team also evaluated specific QA elements relating to WAP requirements.

3.0 AUDIT TEAM AND OBSERVERS

AUDITORS/TECHNICAL SPECIALISTS

Dennis S. Miehls	Management Representative, CBFO Office of Quality Assurance
Berry Pace	Audit Team Leader, CBFO Technical Assistance Contractor (CTAC)
Cindi Castillo	Auditor, CTAC
Earl Bradford	Auditor, CTAC
Katie Martin	Auditor, CTAC
Priscilla Martinez	Auditor, CTAC
Kirk Kirkes	Technical Specialist, CTAC
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Dick Blauvelt	Technical Specialist, CTAC
Rhett Bradford	Technical Specialist, CTAC
Paul Gomez	Technical Specialist, CTAC

OBSERVERS

Jose Franco	CBFO Office of General Manager
Tom Morgan	CBFO Office of the National TRU Program
Norma Castaneda	CBFO Office of the National TRU Program
Trais Kliphuis	NMED
Ricardo Maestas	NMED
Steve Holmes	NMED
Siona Briley	NMED
Tim Hall	NMED
Joe Harvill	CTAC
Randall Allen	CTAC

4.0 AUDIT PARTICIPANTS

The LANL/CCP individuals involved in the audit process are identified in Attachment 1. A pre-audit meeting was held on July 23, 2013, in the Universal Research Services (URS) corporate offices in Los Alamos, NM, and at the Skeen-Whitlock Building in Carlsbad, NM. Audit team central work space was provided by LANL/CCP at the URS corporate offices. Daily management briefings were held with LANL/CCP management and staff to discuss audit progress and any concerns that arose. A post-audit meeting

was held on July 25, 2013, at the URS corporate offices and in the Skeen-Whitlock Building.

5.0 SUMMARY OF AUDIT RESULTS

5.1 Program Adequacy, Implementation, and Effectiveness

The audit team concluded that the LANL/CCP TRU waste characterization, certification and transportation programs evaluated are adequately established for compliance with upper-tier requirements, effectively implemented, and satisfactory in achieving the desired results. The specific program elements and areas evaluated are described below. Attachment 2 is a list of personnel contacted during the audit by subject area. Attachment 3 contains the objective evidence compiled during the audit (provided in boxes). Attachment 4 is the table of audited documents. Attachment 5 is a list of processes and equipment evaluated during the audit. Attachment 6 is the procedure revision matrix.

5.2 General Activities

5.2.1 Results of Previous Audits

The results of CBFO Recertification Audit A-12-12 of LANL/CCP were examined. No WAP-related conditions adverse to quality (CAQ) requiring a corrective action report (CAR) were issued as a result of Audit A-12-12.

5.2.2 Changes in Programs or Operations

No significant changes in CCP programs or operations have occurred at LANL since CBFO Audit A-12-12.

5.2.3 New Programs or Activities Being Implemented

No new WAP-related programs or new activities have been implemented since CBFO Audit A-12-12.

5.2.4 Changes in Key Personnel

No significant changes in key personnel were made at LANL since CBFO Audit A-12-12.

5.3 WAP-related Quality Assurance Activities

As discussed in section 2.0, WAP-related QA program elements were evaluated using WAP checklists C6-1 and C6-3, dated May 8, 2012.

The following sections describe the methods used to select objective evidence, briefly cite the objective evidence used to assess compliance with the WAP and CBFO QAPD, and provide the results of the assessment.

The following WAP-related QA elements were evaluated by the audit team.

5.3.1 Personnel Qualification and Training

The audit team conducted interviews with responsible personnel and reviewed implementing procedure CCP-QP-002, Rev. 35, *CCP Training and Qualification Plan*, to determine the degree to which the procedure adequately addresses upper-tier requirements. Results of the review indicate that the procedure adequately addresses upper-tier requirements.

Personnel training records associated with VE (including the Off-site Source Recovery Project (OSRP)), RTR, HSG sampling, AK, site project managers (SPMs), and transportation were examined to verify adherence to and implementation of associated requirements and to verify that personnel were appropriately trained/qualified. The audit team reviewed qualification cards and other pertinent qualification documentation, including attendance sheets/briefings on newly revised AK summaries for RTR and VE operators, capability demonstration tests and training container documentation, eye exams, and other items.

No WAP-related deficiencies regarding personnel training and qualification were identified during the audit. Review of CCP-QP-002, Rev. 35, and objective evidence assembled and evaluated by the audit team provided evidence that the applicable requirements for personnel qualification and training are adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

5.3.2 Nonconformances

The audit team reviewed implementing procedure CCP-QP-005, Rev. 23, *CCP TRU Nonconforming Item Reporting and Control*, to determine the degree to which the procedure adequately addresses upper-tier requirements. Results of the review indicate that the procedure adequately addresses upper-tier requirements.

The audit team interviewed the CCP/Carlsbad project office quality assurance engineer and randomly selected the following nonconformance reports (NCRs) for review.

NCR-LANL-1008-12, R0	NCR-LANL-1030-12, R0	NCR-LANL-1035-12, R0
NCR-LANL-1036-12, R0	NCR-LANL-1534-12, R0	NCR-LANL-1548-12, R0
NCR-LANL-0184-13, R0	NCR-LANL-0192-13, R0	NCR-LANL-0193-13, R0
NCR-LANL-0197-13, R0	NCR-LANL-0589-13, R0	NCR-LANL-1231-12, R0
NCR-LANL-1233-12, R0	NCR-LANL-1328-12, R1	NCR-LANL-1532-12, R0
NCR-LANL-1608-12, R0	NCR-LANL-1611-12, R0	NCR-LANL-1620-12, R0

NCR-LANL-1624-12, R1	NCR-LANL-1626-12, R0	NCR-LANL-1852-12, R0
NCR-LANL-1856-12, R0	NCR-LANL-1857-12, R0	NCR-LANL-1859-12, R0
NCR-LANL-1905-12, R1	NCR-LANL-1969-12, R1	NCR-LANL-1971-12, R0
NCR-LANL-0012-13, R0	NCR-LANL-0037-13, R0	NCR-LANL-0038-13, R0
NCR-LANL-0548-13, R0		

The team concluded that deficiencies are appropriately documented and tracked through resolution as required. Five of the NCRs selected (NCR-LANL-1010-12, R0; NCR-LANL-1026-12, R0; NCR-LANL-1535-12, R0; NCR-LANL-1538-12, R0; and NCR-LANL-1790-12, R0) documented non-administrative deficiencies first identified at the SPM level. As required, these NCRs were verified as having been reported to the Permittee within seven days, as required by the Permit. All the NCRs examined were verified to have been entered, managed and tracked in both the CCP data center and the NCR Logs for 2012 and 2013, and through the required reconciliation reporting mechanism.

No WAP-related deficiencies regarding nonconformances were identified during the audit. The procedures reviewed and objective evidence assembled and evaluated during the audit provided evidence that the applicable requirements for nonconformances are adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

5.3.3 Records

The audit team conducted interviews and reviewed implementing procedures relative to the control and administration of QA records to determine the degree to which the procedures adequately address upper-tier requirements. The audit team reviewed procedures CCP-QP-008, Rev. 21, *CCP Records Management*, and CCP-QP-028, Rev. 15, *CCP Records Filing, Inventorying, Scheduling, and Dispositioning*. Results of the review indicate that the procedure adequately addresses upper-tier requirements. Control of QA records was verified through review of the CH Records Inventory and Disposition Schedule (RIDS) dated 8/2/12.

No WAP-related deficiencies related to records were identified during the audit. The procedures reviewed and objective evidence assembled and evaluated during the audit provided evidence that the applicable requirements for records are adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

5.4 Technical Activities

Each technical area audited is discussed in detail in the following sections. The methods used to select objective evidence are discussed, the objective evidence used to assess compliance with the HWFP WAP is cited briefly, and the results of the assessment are provided.

5.4.1 Table C6-1, WAP Checklist (May 8, 2012)

As discussed in section 2.0, overall WAP activities were evaluated using WAP checklists C6-1, dated May 8, 2012. Checklist C6-3, dated March 13, 2013, was used for the evaluation of project-level data V&V requirements associated with RTR.

The audit was performed to assess LANL/CCP's ability to manage and perform TRU waste characterization and certification activities for CH SCG S3000 homogeneous solids, SCG S4000 soils/gravel and SCG S5000 debris wastes. The C6-1 WAP checklist addresses general program requirements from an overall management perspective. The general requirements checklist addresses both technical requirements and specific WAP-related QA programmatic requirements that, when collectively implemented, ensure effective overall management of TRU waste characterization and certification activities. Requirements are integrated into controlled documents to ensure the waste characterization strategy as defined in the WAP is accomplished and documented in accordance with controlled processes and procedures.

Technical activities evaluated for characterization and certification activities consisted of data-generation and project-level data V&V, AK, RTR, VE, SS&A, HSG S&A (including Performance Demonstration Program [PDP] participation), and preparation of Waste Stream Profile Forms (WSPFs) for CH SCG S3000 homogeneous solids, SCG S4000 soils/gravel and SCG S5000 debris wastes. Objective evidence was selected and reviewed to evaluate the implementation of the associated characterization activities. Batch data reports (BDRs), sampling records, and personnel qualification and training documentation were included in the evaluation. Where possible, the audit included direct observation of actual waste characterization activities. Each characterization process involves:

- Collecting raw data
- Collecting quality assurance/quality control samples or information
- Reducing the data to a useable format, including a standard report
- Review of the report by the data generation facility and the site project office
- Comparing the data against program data quality objectives (DQOs)
- Reporting the final waste characterization information to the WIPP

The flow of data from the point of generation to inclusion in the WSPF for each characterization technique was reviewed to ensure that all applicable requirements were captured in the site operating procedures. Specific procedures audited and the objective evidence reviewed are described in the following sections.

During the audit, LANL/CCP demonstrated compliance with the waste characterization requirements of the WAP through documentation and by performing characterization activities.

The audit team reviewed the following CCP documents/procedures to determine the degree to which they adequately address project-level data V&V upper-tier requirements:

- CCP-PO-001, Rev. 20, *CCP Transuranic Waste Characterization Quality Assurance Project Plan*
- CCP-TP-001, Rev. 20, *CCP Project Level Data Validation and Verification*
- CCP-TP-002, Rev. 25, *CCP Reconciliation of DQOs and Reporting Characterization Data*
- CCP-TP-003, Rev. 19, *CCP Data Analysis for S3000, S4000, and S5000 Characterization*
- CCP-TP-005, Rev. 24, *CCP Acceptable Knowledge Documentation*
- CCP-TP-093, Rev. 17, *CCP Sampling of TRU Waste Containers*
- CCP-TP-162, Rev. 2, *CCP Random Selection of Containers for Solids and Headspace Gas Sampling and Analysis*
- CCP-TP-180, Rev. 3, *CCP Analytical Sample Management*

Results of the review indicate that the procedures adequately address upper-tier requirements.

The random selection of containers for waste streams LA-MHD10.001 and LA-MSG04.001 was reviewed, along with the quarterly repeat of data-generation level reviews. Both were determined to be compliant with project-level requirements. Training records for SPMs identified in selected WSPFs and BDRs were reviewed to verify required qualifications and training.

The following WSPF/Characterization Information Summaries (CISs) and associated BDRs were reviewed:

WSPF LA-MHD.10.001 and CIS Lots 1 through 6
WSPF LA-MSG04.001 and CIS Lot 1
WSPF LA-MIN04.001 and CIS Lots 1 through 7

Visual Examination BDRs:

LAVE550081 LAVE550100 LA12-OSR-VE-045 LA13-OSR-VE-003

Headspace Gas BDRs:

LAHSG1207 LAHSG1208 LAHSG1301
ECL12039M ECL12048M ECL13003M

Real-time Radiography BDRs:

LA-HERTR-12-0066 LA-HERTR-12-0096 LA-HERTR-12-0111
LA-HERTR-12-0116

Solid/Soils Sampling and Analysis BDRs:

SSG12-00006 ALD12028V ALD12028S ALD12028N ALD12028M

As discussed in section 2.0, WWIS/WDS activities were evaluated using WAP checklists C6-1, dated March 13, 2013, since the requirements for WWIS/WDS remained unchanged with the Permit modification on March 13, 2013.

The audit team reviewed CCP procedure CCP-TP-030, Rev. 32, *CH TRU Waste Certification and WWIS/WDS Data Entry*, to determine the degree to which it adequately addresses upper-tier requirements. Results of the review indicate that the procedure adequately addresses upper-tier requirements.

The audit team interviewed responsible personnel, examined related data and observed entry of information into the WWIS/WDS by a Waste Certification Assistant and Waste Certification Official. Record reviews included container information summaries, pages from selected BDRs reflecting analyses values, WWIS/WDS Container Data Reports, and submittals for WWIS review and approval.

The audit team reviewed the following complete WWIS/WDS waste certification packages for CH waste.

LA00000093130	LA00000093160	LA00000093224 (SCG S3000)
LA00000089982	LA00000089985	LA00000089986 (SCG S4000)
LA00000057049	LA00000092725	LAS855309 (SCG S5000)

No WAP deficiencies related to Table C6-1 were identified during the audit. The procedures reviewed and objective evidence assembled and evaluated during the audit provided evidence that Table C6-1 requirements are adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

5.4.2 Table C6-2, Solids and Soils/Gravel Sampling Checklist (May 8, 2012)

Solids and soils/gravel sampling is not performed at LANL. Containers requiring sampling were transported to the Idaho National Laboratory (INL) for sampling and analysis. The Permit modification approved on March 13, 2013, eliminated the requirement for solids sampling.

5.4.3 Table C6-3, Acceptable Knowledge Checklist (May 8, 2012)

As discussed in section 2.0, AK activities were evaluated using WAP checklists C6-3, dated May 8, 2012.

The audit team reviewed the following CCP documents/procedures as they relate to AK to determine the degree to which they adequately address applicable upper-tier requirements.

- CCP-PO-001 R20, *CCP Transuranic Waste Characterization Quality Assurance Plan*
- CCP-QP-005 R22, *CCP TRU Nonconforming Item Reporting and Control*
- CCP-QP-021 R8, *CCP Surveillance Program*
- CCP-TP-001 R20, *CCP Project Level Data Validation and Verification*
- CCP-TP-002 R25, *CCP Reconciliation of DQOs and Reporting Characterization Data*
- CCP-TP-003 R19, *CCP Data Analysis for S3000, S4000, and S5000 Characterization*
- CCP-TP-005 R24, *CCP Acceptable Knowledge Documentation*
- CCP-TP-120 R15, *CCP Container Management*
- WP 13-QA.03 R22, *Quality Assurance Independent Assessment Program*

Results of the review indicate that the procedures adequately address upper-tier requirements.

The audit team examined AK Summary Reports and approved WSPFs for waste streams LA-MIN04-S.001, S3000 homogeneous solids associated with activities in TA-55; LA-MSG04.001, S4000 soils/gravel associated with activities in TA-21; and LA-MHD10.001, S5000 debris associated with activities in Technical Area (TA)-39.

The audit team also examined the following completed attachments for each stream as required by CCP procedure CCP-TP-005: Attachment 1, *AK Documentation Checklist*; Attachment 4, *AK Information List*; Attachment 5, *Hazardous Constituents List*; Attachment 6, *Waste Form, Waste Material Parameters, Prohibited Items and Packaging*, along with the justification for waste material parameter weight estimates; and Attachment 8, *Waste Container List*, with memos supporting the addition of containers to the waste stream as applicable.

The team examined numerous AK Source Documents and Source Document Summaries supporting the information in the associated AK Summary Reports, including examples of discrepancies identified between the AK record, characterization activities, and resultant AK reevaluations.

The audit team also reviewed NCRs initiated to address prohibited items identified during RTR of waste drums. These included NCRs to address excess liquids, sealed containers greater than 4 liters, and the presence of impenetrable objects. The WAP-required traceability exercise was conducted for six containers in total from the three streams, including containers from HSG sampling for the referenced debris stream and

solids sampling from the referenced solids and soil streams. In addition to specific BDRs for the drums and boxes selected, the team also examined HSG and Solids Sampling Random Container Selection memos, HSG Summary Reports, Solids Summary Reports, container input forms, historical and current database records, AK Accuracy Reports, independent assessment results, and waste stream characterization checklists used to reconcile characterization results with the AK record for waste containers placed in a shipping lot.

No WAP deficiencies related to Table C6-3 were identified during the audit. The procedures reviewed and objective evidence assembled and evaluated during the audit provided evidence that Table C6-3 requirements are adequately established, effectively implemented and achieving the desired results.

5.4.4 Table C6-4, Headspace Gas Checklist (May 8, 2012)

As discussed in section 2.0, HSG sampling activities were evaluated using WAP checklists C6-4, dated May 8, 2012.

The audit team reviewed the following CCP procedures to determine their adequacy in addressing upper-tier requirements.

- CCP-TP-056, Rev. 5, *CCP HSG Performance Demonstration Plan*
- CCP-TP-082, Rev. 8, *CCP Preparing and Handling Waste Containers for Headspace Gas Sampling*
- CCP-TP-093, Rev. 15, *CCP Sampling of TRU Waste Containers*
- CCP-TP-098, Rev. 3, *CCP Installation of the NucFil HSG Sample Port*
- CCP-TP-106, Rev. 7, *CCP Headspace Gas Sampling Batch Data Report Preparation*
- CCP-TP-162, Rev. 1, *CCP Random Selection of Containers for Solids and Headspace Gas Sampling and Analysis*

Results of the review indicate that the procedures adequately address upper-tier requirements.

HSG sampling and analysis were performed at the INL until the Permit modification of March 13, 2013. Certification audits of INL analytical programs and processes were performed annually.

The audit team interviewed responsible personnel and examined the following HSG Sampling BDRs:

LAHSG1204
LAHSG1208

LAHSG1205
LAHSG1301

LAHSG1206
LAHSG1302

LAHSG1207

The data in the BDRs supported four debris waste streams and were determined to be complete, accurate and compliant with requirements.

Two NCRs generated as a result of HSG sampling were examined to verify that deficiencies were appropriately documented, reported, and resolved in accordance with requirements. Both NCRs dealt with an unanswered question in the Independent Technical Review (ITR) checklist regarding drum age criteria (DAC). In both instances, the deficiencies were verified to be appropriately documented and resolved in accordance with nonconformance reporting requirements. The repetitive nature of the NCRs was evaluated by CCP QA as required, and was determined not to constitute a significant condition adverse to quality.

Training records for personnel identified in the BDRs were reviewed and the audit team determined that personnel were appropriately trained and qualified. Completed BDRs were verified for compliance with QA and quality control sampling and reporting requirements. Accuracy and completion of chain-of-custody forms, sample tags, needle blank results, container data, and temperature equilibration information were verified to be compliant for each BDR.

Equipment cleanliness documentation was examined and verified to be complete and compliant as required. Proper DAC reporting for containers in each BDR was evaluated. The audit team identified one container that did not meet the DAC requirement. This condition was documented in NCR-LANL-1532-12, associated with BDR LAHSG1204. The container was resampled after the DAC was achieved and results were documented in BDR LAHSG1301. Documentation regarding a field reference standard results report issued in 2007 was also examined and verified to be correct.

No WAP deficiencies related to Table C6-4 were identified during the audit. The procedures reviewed and objective evidence assembled and evaluated during the audit provided evidence that Table C6-4 requirements are adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

5.4.5 Table C6-3, Radiography Checklist (March 13, 2013)

As discussed in section 2.0, RTR activities were evaluated using WAP checklists C6-3, dated March 13, 2013.

The audit team reviewed the following implementing procedures to determine the degree to which they adequately address upper-tier requirements.

- CCP-QP-002, Rev. 35, *CCP Training and Qualification Plan*
- CCP-TP-028, Rev. 8, *CCP Radiographic Test and Training Drum Requirements*
- CCP-TP-053, Rev. 13, *CCP Standard Real-Time Radiography (RTR) Inspection Procedure*

- CCP-TP-198, Rev. 7, *CCP HE-RTR Operating Procedure*

Results of the review indicate that the procedures adequately address upper-tier requirements.

The audit team examined personnel training and qualification documentation including RTR Operator/ITR qualification cards, test drum and training container documentation, and the associated List of Qualified Individuals (LOQI) dated July 22, 2013. The audit team also verified RTR operators received waste stream-specific AK Summary briefings. The audit team evaluated RTR operator-required test and training drum audio/video media for six RTR operators and determined that all RTR operators were properly trained and qualified to perform their assigned tasks.

The audit team evaluated RTR operations performed on two RTR systems used in TA-54. The audit team observed RTR operations on the RTR2 unit in TA-54, building 54-497, including the RTR characterization scan for CH SCG S5000 debris waste container 93617. The audit team also observed RTR operations on the High-Energy RTR system in TA-54, building 54-578, including the RTR characterization scan for CH SCG S3000 solids waste container 93999. The audit team verified the use of current RTR operating procedures and AK summaries. Both RTR units contained the required hardware to effectively characterize CH SCGs S3000 solids, S4000 soils/gravel, and S5000 debris wastes. The audit team interviewed RTR operators and examined RTR operational logbooks LANL-NDE-RTR2-1010 and LANL-NDE-HERTR02-003 to verify that logbook entries were correct and had been reviewed by the vendor project manager as required.

The audit team examined the following CH RTR BDRs.

High Energy RTR BDRs:

LA-HERTR-12-0073 LA-HERTR-12-0109 LA-HERTR-13-0019
LA-HERTR-13-0048

RTR2 BDRS

LA-RTR2-12-0088 LA-RTR2-12-0091 LA-RTR2-12-0126
LA-RTR2-12-0136

In addition, audio/video media of selected containers were reviewed to verify the accuracy of data recorded on RTR data sheets.

No WAP deficiencies related to Table C6-3 were identified during the audit. The procedures reviewed and objective evidence assembled and evaluated during the audit provided evidence that Table C6-3 requirements are adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

5.4.6 Table C6-4, Visual Examination Checklist (March 13, 2013)

As discussed in section 2.0, RTR activities were evaluated using WAP checklists C6-4, dated March 13, 2013.

The audit team reviewed the following CCP VE procedures to determine the degree to which they adequately address upper-tier requirements:

- CCP-PO-001, Rev. 21, *CCP Transuranic Waste Characterization Quality Assurance Project Plan*
- CCP-QP-002, Rev. 35 *CCP Training and Qualification Plan*
- CCP-TP-069, Rev. 6 *CCP Sealed Source Visual Examination and Packaging*
- CCP-TP-113, Rev. 17 *CCP Standard Contract Handled Waste Visual Examination*

Results of the review indicate that the procedures adequately address upper-tier requirements.

The audit team conducted interviews with responsible personnel and examined records documenting VE of debris waste, including source waste in the OSRP.

The team examined the following VE BDRs.

LAVE500503	LAVE550076	LAVE550080	LAVE550090
LAVE550101	LAVE550113	LAVE4120014	
LA12-OSR-VE-044	LA12-OSR-VE-050	LA13-OSR-VE-001	
LA13-OSR-VE-010			

No visual examination activities were being conducted at the time of the audit. The audit team toured VE facilities in TA-54 building 412 and the Waste Characterization Remediation and Repackaging Facility (WCRRF) to interview operators, verify procedure accessibility, and evaluate the use of logbooks. Method 2 is used by CCP at LANL for conducting VE (i.e., two qualified operators visually examine waste and place it into containers). Records of VE operator training were examined, which confirmed that personnel are appropriately trained and qualified. The audit team also verified the appointments of VE Experts as required.

No WAP deficiencies related to Table C6-4 were identified during the audit. The procedures reviewed and objective evidence assembled and evaluated during the audit provided evidence that Table C6-4 requirements are adequately established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results.

6.0 CORRECTIVE ACTIONS, OBSERVATIONS, AND RECOMMENDATIONS

6.1 Corrective Action Reports

During the audit, the audit team may identify CAQs, as defined below, and document such conditions on CARs.

Condition Adverse to Quality (CAQ) – Term used in reference to failures, malfunctions, deficiencies, defective items, and nonconformances.

Significant Condition Adverse to Quality – A condition which, if uncorrected, could have a serious effect on safety, operability, waste confinement, TRU waste site certification, compliance demonstration, or the effective implementation of the Quality Assurance (QA) program.

No WAP-related conditions adverse to quality necessitating a CAR were identified during the audit.

6.2 Deficiencies Corrected During the Audit

During the audit, the audit team may identify CAQs. Audit team members, the audit team leader (ATL), and the CBFO QA representative evaluate the CAQs to determine if they are significant using the following definitions:

CAQ – Term used in reference to failures, malfunctions, deficiencies, defective items, and nonconformances.

Significant CAQ – A condition which, if uncorrected, could have a serious effect on safety, operability, waste confinement, TRU waste site certification, compliance demonstration, or the effective implementation of the QA program.

Once a determination is made that the CAQ is not significant, the audit team member, in conjunction with the ATL and the CBFO QA representative, determines if the CAQ is an isolated case requiring only remedial action and therefore can be corrected during the audit. Upon determination that the CAQ is isolated, the audit team member, in conjunction with the ATL and the CBFO QA representative, evaluates/verifies any objective evidence/actions submitted or taken by the audited organization and determines if the condition was corrected in an acceptable manner. Once it has been determined that the CAQ has been corrected, the CBFO QA representative categorizes the condition as corrected during audit (CDA) according to the definition below.

CDAs – Isolated deficiencies that do not require a root cause determination or actions to preclude recurrence. Correction of the deficiency can be verified prior to the end of the audit. Examples include one or two minor changes required to correct a procedure (isolated), one or two forms not signed or not dated

(isolated), and one or two individuals that have not completed a reading assignment.

No WAP-related conditions adverse to quality corrected during the audit were identified during the audit.

7.0 SUMMARY OF OBSERVATIONS AND RECOMMENDATIONS

During the audit, the audit team may identify potential problems or suggestions for improvement that should be communicated to the audited organization. The CBFO QA representative evaluates these conditions and classifies them as Observations or Recommendations using the following definitions.

Observation – A condition that, if not controlled, could result in a CAQ.

Recommendation – Suggestion that is directed toward identifying opportunities for improvement and enhancing methods of implementing requirements.

Once a determination is made, the CBFO QA representative categorizes the condition appropriately.

7.1 Observations

No WAP-related Observations were identified during the audit.

7.2 Recommendations

No WAP-related Recommendations were identified during the audit.

8.0 LIST OF ATTACHMENTS

Attachment 1: Personnel Contacted During the Audit

Attachment 2: Personnel Contacted During the Audit by Subject Area

Attachment 3: Objective Evidence Compiled During the Audit (provided in boxes)

Attachment 4: Table of Audited Documents

Attachment 5: List of Processes and Equipment Evaluated During the Audit

Attachment 6: Procedure Revision Matrix

PERSONNEL CONTACTED DURING THE AUDIT

PERSONNEL CONTACTED DURING AUDIT A-13-23				
NAME	TITLE/ORG	PREAUDIT MEETING	CONTACTED DURING AUDIT	POST AUDIT MEETING
Baca, R.	Records Coordinator/NWP/CCP	X	X	X
Cameron, W.	Container Management Specialist/CCP/LANL		X	
Chavarria, A.	QA Engineer/NWP/QA	X		
Elliot, A.	RTR Operator/NWP/CCP	X	X	X
Fisher, A. J.	Technical Advisor/NWP/CCP	X		
Gammon, E.	OSRP/LANL	X	X	
Groover, T.	Site Project Manager/NWP/CCP	X	X	X
Hemsing, D.	VE Lead/NWP/CCP		X	
Ledford, W.	QA Specialist/NWP/QA			X
Mueller, T.	QA Analyst/NWP/QA	X		
Papp, M.	Acceptable Knowledge Expert/NWP/CCP/Tech Spec	X	X	
Pearcy, S.	Records Manager/NWP/CCP	X	X	X
Ramirez, M.	Waste Certification Official/NWP/CCP	X		
Schoen, J.	Acceptable Knowledge Expert/NWP/CCP/Tech Spec	X		
Sensibaugh, M.	Project Manager/NWP/CCP	X	X	
Simmons, C.	Site Project Manager/NWP/CCP	X	X	X
Simpson, K.	RTR Subject Matter Expert/NWP/CCP/VJT	X	X	X
Stallings, A.	NDE Cognizant Engineer/NWP/CCP	X	X	
Stepzinski, J.	Vendor Project Manager/NWP/CCP	X	X	X
Thompson, J.	VEE/NWP/CCP		X	
Wachter, J.	Technical Director/NWP/CCP/MCS	X	X	
Waldram, V.	Site Project Manager/NWP/CCP	X		X
Witkowski, I.	OSRP/LANL	X	X	

PERSONNEL CONTACTED DURING THE AUDIT BY SUBJECT AREA

Personnel Qualification and Training	Cheryl Armijo Michele Billett
Control of Nonconforming Items	Laura Jones
Records	Sheila Pearcy
WIPP Waste Information System (WWIS Data Entry)	Creta Kirkes Mike Ramirez
Waste Certification/Project Level Data V&V	Veronica Waldram
Solids Sampling and Analysis	N/A
Acceptable Knowledge	Jim Schoen Mike Papp Veronica Waldram Mak Taylor Shiela Pearcy Wayne Ledford Laura Jones Michelle Billet Val Cannon Austin Perlt Trey Greenwood
Headspace Gas Sampling and Analysis	Veronica Waldram
Real-Time Radiography	Kenneth Simpson Andrew Stallings Aaron Elliott Ranada Baca Eric Lyles Michael Simmons
Visual Examination	David Hemsing James Thompson Craig Simmons Joe Stepzinski Terri-Anne Groover Ioana Witkowski Elleg Gammon

Objective Evidence Reviewed During the Audit

The objective evidence supporting Audit A-13-23 is included in the box(es) submitted with this report. Included in the box(es) is a "Content Map" describing the location (using color coding) and identity of all required objective evidence supporting the performance of the audit.

TABLE OF AUDITED DOCUMENTS

NUMBER	PROCEDURE NUMBER	REVISION NUMBER	PROCEDURE TITLE
1.	CCP-AK-LANL-014	1	CCP AK Summary Report for LANL TA-39 Two-Stage Gas Gun Facility, Waste Stream LA-MHD10.001
2.	CCP-AK-LANL-006	12	CCP AK Summary Report for LANL TA-55 Mixed TRU Waste Stream LA-MIN04-S.001
3.	CCP-AK-LANL-010	5	CCP AK Summary Report for LANL TA-21 DP West Facility Waste Stream LA-MSG04.001
4.	CCP-PO-001	20	CCP Transuranic Waste Characterization Quality Assurance Project Plan
5.	CCP-PO-001	21	CCP Transuranic Waste Characterization Quality Assurance Project Plan
6.	CCP-PO-012	13	CCP/LANL Interface Document
7.	CCP-QP-002	35	CCP Training and Qualification Plan
8.	CCP-QP-005*	22	CCP TRU Nonconforming Item Reporting and Control
9.	CCP-QP-005	23	CCP TRU Nonconforming Item Reporting and Control
10.	CCP-QP-008	21	CCP Records Management
11.	CCP-QP-021	8	CCP Surveillance Program
12.	CCP-QP-028	15	CCP Records Filing, Inventorying, Scheduling, and Dispositioning
13.	CCP-TP-001	20	CCP Project Level Data Validation and Verification
14.	CCP-TP-002	25	CCP Reconciliation of DQOs and Reporting Characterization Data
15.	CCP-TP-003	19	CCP Data Analysis for S3000, S4000, and S5000 Characterization
16.	CCP-TP-005*	24	CCP Acceptable Knowledge Documentation
17.	CCP-TP-005	25	CCP Acceptable Knowledge Documentation
18.	CCP-TP-008	9	CCP Solids Sampling Procedure
19.	CCP-TP-028*	7	CCP Radiographic Test Drum and Training Container Construction
20.	CCP-TP-028	8	CCP Radiographic Test Drum and Training Container Construction
21.	CCP-TP-030*	31	CCP CH TRU Waste Characterization and WWIS Data Entry
22.	CCP-TP-030	32	CCP CH TRU Waste Characterization and WWIS Data Entry
23.	CCP-TP-033*	19	CCP Shipping of CH TRU Waste
24.	CCP-TP-033	20	CCP Shipping of CH TRU Waste
25.	CCP-TP-053	13	CCP Standard Real-Time Radiography (RTR) Inspection Procedure
26.	CCP-TP-056	5	CCP HSG Performance Demonstration Plan
27.	CCP-TP-082	8	CCP Preparing and Handling Waste Containers for Headspace Gas Sampling
28.	CCP-TP-093*	15	CCP Sampling of TRU Waste Containers
29.	CCP-TP-093	17	CCP Sampling of TRU Waste Containers
30.	CCP-TP-098	3	CCP Installation of the NucFil HSG Sample Port
31.	CCP-TP-101	6	CCP Off-Site Source Recovery Project Sealed Source

NUMBER	PROCEDURE NUMBER	REVISION NUMBER	PROCEDURE TITLE
			Radiological Characterization
32.	CCP-TP-106	7	CCP Headspace Gas Sampling Batch Data Report Preparation
33.	CCP-TP-113	17	CCP Contact-Handled Standard Waste Visual Examination
34.	CCP-TP-162*	1	CCP Random Selection of Containers for Solids and Headspace Gas Sampling and Analysis
35.	CCP-TP-162	2	CCP Random Selection of Containers for Solids and Headspace Gas Sampling and Analysis
36.	CCP-TP-180	3	CCP Analytical Sample Management
37.	CCP-TP-198	7	CCP HE-RTR Operating Procedure
38.	DOE/CBFO 94-1012	11	CBFO Quality Assurance Program Document (QAPD)
39.	WP 13-QA.03	22	Quality Assurance Independent Assessment Program

* Indicates procedures used to evaluate activities performed prior to March 13, 2013.

List of Processes and Equipment Evaluated

WIPP #	Process/Equipment Description	Applicable to the Following Waste Streams/Groups of Waste Streams	Currently Approved by NMED	Currently Approved by EPA
NEW PROCESSES OR EQUIPMENT				
NONE				
APPROVED PROCESSES OR EQUIPMENT				
The following processes and equipment were evaluated during CBFO Audit A-13-23				
N/A	Headspace Gas Sampling Procedure – CCP -TP-093 Description – Headspace Gas Sampling Note: Headspace gas sampling is no longer required by the Permit as of March 13, 2013.	Debris (S5000)	YES	N/A
11RR2	Real-Time Radiography (RTR) Procedure(s) – CCP-TP-053 and CCP-TP-028 Description – Real-Time Radiography Mobile Characterization System RTR [built by VJ Technologies] – 55-gallon drums	Solids (S3000) Soils/Gravel (S4000) Debris (S5000)	YES	YES
11HERTR3	High Energy Real Time Radiography (HERTR) Procedures CCP-TP-053 and CCP-TP-028 Description – High Energy Real-Time Radiography (RTR) [built by VJ Technologies] 55-gallon drums and SWBs	Solids (S3000) Soils/Gravel (S4000) Debris (S5000)	YES	YES
11VE1	CH Visual Examination Procedure – CCP-TP-113 Description – CH Characterization Performed Utilizing Visual Examination and Acceptable Knowledge	Solids (S3000) Soils/Gravel (S4000) Debris (S5000)	YES	YES
11VE2	Off-Site Source Recovery Program Procedure(s) – CCP-TP-069 and CCP-TP-101 Description – Characterization Performed Utilizing Visual Examination and Acceptable Knowledge	Debris (S5000)	YES	YES
N/A	Acceptable Knowledge Procedure – CCP-TP-005 Description – Acceptable Knowledge	Solids (S3000) Soils/Gravel (S4000) Debris (S5000)	YES	YES
N/A	Data Verification and Validation Procedure(s) – CCP-TP-001, CCP-TP-002, CCP-TP-003, CCP-TP-103, CCP-TP-162	Solids (S3000) Soils/Gravel (S4000) Debris (S5000)	YES	YES

List of Processes and Equipment Evaluated

WIPP #	Process/Equipment Description	Applicable to the Following Waste Streams/Groups of Waste Streams	Currently Approved by NMED	Currently Approved by EPA
N/A	WWIS/WDS Procedure – CCP-TP-030 Description – CH TRU Waste Characterization and WWIS Data Entry	Solids (S3000) Soils/Gravel (S4000) Debris (S5000)	YES	YES

Procedure Revision Matrix

No	Procedure Number	Procedure Title	Revision During Last Annual Audit	Revision During Current Annual Audit	Brief Description of Procedure Changes
1	CCP-PO-001	CCP Transuranic Waste Characterization Quality Assurance Project Plan	20	21	Revised to clarify hierarchy of documents, adding Washington TRU Solutions (WTS) 13-1, Quality Assurance Program Description; and made other administrative changes as needed.
2	CCP-PO-002	CCP Transuranic Waste Certification Plan	26	27	Revised to incorporate Revision 7.3 and Revision 7.4 of DOE/WIPP-02-3122, <i>Transuranic Waste Acceptance Criteria for the Waste Isolation Pilot Plant</i> , which incorporates the changes resulting for the Class 2 Permit modification entitled "Revised Waste Analysis Plan Waste Characterization Methods" which was approved by New Mexico Environment Department (NMED) on March 13, 2013, incorporate organizational changes to reflect the transition to Nuclear Waste Partnership (NWP), to clarify the hierarchy of quality assurance (QA) program documents, and minor editorial changes.
3	CCP-PO-012	CCP/LANL Interface Document	10	12	<p>R11 - Revised to incorporate NWP transition changes.</p> <p>R12 - In response to CAR-LANL-0003-12, revised to clarify roles associated with providing M&TE Certificates of Calibration to CCP.</p>

Procedure Revision Matrix

No	Procedure Number	Procedure Title	Revision During Last Annual Audit	Revision During Current Annual Audit	Brief Description of Procedure Changes
4	CCP-QP-002	CCP Training and Qualification Plan	32	35	<p>R33 - As a corrective action in response to CBFO CAR 12-033, revised the document to remove references to Lead SPMs and Alternate SPMs, so that any qualified SPM may perform the actions in Section 3.1.</p> <p>R34 - Revised to incorporate Standing Order CCP-SO-086, Clarification of the Time Period for Performance of the RTR Semiannual Training Container Required by CCP-QP-002; incorporate changes to DOE/WIPP-02-3214, Remote-Handled TRU Waste Characterization Program Implementation Plan; update the title of the organization, as appropriate; and minor editorial changes.</p> <p>R35 - Revised to implement the Permit Modification Request Class 2 approved by New Mexico Environment Department (NMED) dated March 13, 2013 and CAR-CCP-0003-13.</p>
5	CCP-QP-005	CCP TRU Nonconforming Item Reporting and Control	21	23	<p>R22 - Revised to add definitions; to move 2.5.1 to 4.2.1 [F]; to clarify 4.4.15 and Attachment 1, 4.2.10, and CBFO notification in 4.3.1; to add new 4.9.3 to address removal of Hold Tags when voiding a NCR; to incorporate freeze file changes; to modify Attachment 1; to correct some typos and editorial mistakes.</p> <p>R23 - Revised to incorporate Nuclear Waste Partnership (NWP) transition changes; ensure chronological order; to change Notes that include action steps to action steps; to remove contradiction with CCP-PO-024, <i>CCP/INL Interface Document</i>, in 4.5.10 [A.2]; to add Attachment 2, Instructions for Completing Attachment 1, CCP Nonconformance Report, and Attachment 6, NCR Hold Tag Guidance, incorporating portions of Standing Order CCP-SO-036 and to implement the Permit Modification Request Class 2 approved by New Mexico Environment Department (NMED) dated March 13, 2013.</p>

Procedure Revision Matrix

No	Procedure Number	Procedure Title	Revision During Last Annual Audit	Revision During Current Annual Audit	Brief Description of Procedure Changes
6	CCP-QP-008	CCP Records Management	19	21	R20 - Revised to clarify editorial changes, transmitting of records, and destruction of QA records. R21 - Revised to incorporate Nuclear Waste Partnership (NWP) transition changes.
7	CCP-QP-021	CCP Surveillance Program	7	8	Revised to incorporate Nuclear Waste Partnership (NWP) transition changes.
8	CCP-QP-028	CCP Records Filing, Inventorying, Scheduling, and Dispositioning	14	15	Revised to incorporate Nuclear Waste Partnership (NWP) transition changes.
9	CCP-TP-001	CCP Project Level Data Validation and Verification	19	21	R20 – Revised to remove references to P-TS. Also revised due to CAR-LANL-0005-12 and CBFO CAR 12-033. R21 – Revised to address Class 2 Hazardous Waste Facility Permit Modification, which was approved by New Mexico Environmental Department (NMED) on March 13, 2013.
10	CCP-TP-002	CCP Reconciliation of DQOs and Reporting Characterization Data	24	25	Revised to include timeframe for transmitting the waste stream profile form package to records. Also revised to make editorial changes needed.
11	CCP-TP-003	CCP Data Analysis for S3000, S4000, and S5000 Characterization	18	19	Revised to incorporate Nuclear Waste Partnership (NWP) transition changes.
12	CCP-TP-005	CCP Acceptable Knowledge Documentation	24	24	
13	CCP-TP-008	CCP Solids Sampling Procedure	9	9	Obsolete
14	CCP-TP-028	CCP Radiographic Test Drum and Training Container Construction	6	8	R7 - Revised to allow Vendor Project Manager (VPM) to assemble Training Containers. R8 - Revised to include section 4.3 Reconfiguration of Previously Assembled Training Containers.

Procedure Revision Matrix

No	Procedure Number	Procedure Title	Revision During Last Annual Audit	Revision During Current Annual Audit	Brief Description of Procedure Changes
15	CCP-TP-030	CCP CH TRU Waste Certification and WWIS/WDS Data Entry	30	32	<p>R31 - Revised to address CAR-CCP-0003-12 and various editorial changes. Also revised to better streamline the NCR/CAR QA request.</p> <p>R32 - Revised to implement the Permit Modification Request Class 2 approved by New Mexico Environment Department (NMED) dated March 13, 2013 and <i>Contact-Handled Transuranic Waste Authorized Methods for Payload Control (CH-TRAMPAC)</i> changes.</p>
16	CCP-TP-033	CCP Shipping of CH TRU Waste	19	20	Revised to incorporate Nuclear Waste Partnership (NWP) transition changes.
17	CCP-TP-053	CCP Standard Real-Time Radiography (RTR) Inspection Procedure	11	13	<p>R12 – Revised to change format of attachments. Clarified format of container weights and clarified steps for NCRs on Attachment 2, CCP Radiography Data Sheet (Example).</p> <p>R13 – Revised to incorporate Nuclear Waste Partnership (NWP) transition changes, to add software used, and other editorial changes.</p>
18	CCP-TP-056	CCP HSG Performance Demonstration Plan	5	5	Obsolete
19	CCP-TP-069	CCP Sealed Source Visual Examination and Packaging	5	6	Revised to clarify Visual Examination (VE) process and paperwork.
20	CCP-TP-082	CCP Waste Container Filter Vent Operation	8	8	
21	CCP-TP-093	CCP Sampling of TRU Waste Containers	16	17	<p>Revised to respond to CAR-12-040 to enhance the numbering of the Chain of Custody.</p> <p>Obsolete</p>
22	CCP-TP-098	CCP Installation of the NucFil HSG Sample Port	3	3	Obsolete

Procedure Revision Matrix

No	Procedure Number	Procedure Title	Revision During Last Annual Audit	Revision During Current Annual Audit	Brief Description of Procedure Changes
23	CCP-TP-103	CCP Data Reviewing, Validating and Reporting Procedure for the High Efficiency Neutron Counter Using NDA 2000	10	11	Revised to add Mobile ISOCS Large Container Counter (MILCC) to the procedure. Changed procedure name to be inclusive of all nondestructive assay (NDA) counters at Los Alamos National Laboratory (LANL) using NDA 2000.
24	CCP-TP-106	CCP Headspace Gas Sampling Batch Data Report Preparation	7	8	Revised to incorporate freeze file. Obsolete
25	CCP-TP-113	CCP Standard Contact-Handled Waste Visual Examination	16	17	Revised to incorporate the Nuclear Waste Partnership (NWP) transition changes.
26	CCP-TP-162	CCP Random Selection of Containers for Solids and Headspace Gas Sampling and Analysis	1	2	Revised to incorporate Nuclear Waste Partnership (NWP) transition changes and freeze file changes. Obsolete
27	CCP-TP-180	CCP Analytical Sample Management	2	3	Revised to change to CCP format, removed laboratory QA officer steps, revised pre-receipt planning steps, simplified sample checkout and temperature monitoring instructions, updated laboratory name and references, updated example form in Appendix D, and made other editorial corrections. Obsolete
28	CCP-TP-198	CCP HE-RTR Operating Procedure	5	7	R6 – Revised to incorporate VJT’s recommendation for modifying the operating procedure to ensure the system is in standby mode (not completely powered down) and the Temperature Control Unit (TCU) is kept running at all times. R7 – Revised to incorporate Nuclear Waste Partnership (NWP) transition changes and other various changes.
29	DOE/CBFO 94-1012	CBFO Quality Assurance Program Document (QAPD)	11	11	

Procedure Revision Matrix

No	Procedure Number	Procedure Title	Revision During Last Annual Audit	Revision During Current Annual Audit	Brief Description of Procedure Changes
30	DOE/WIPP 02-3122	Transuranic Waste Acceptance Criteria for the Waste Isolation Pilot Plant	7.2	7.4	<p>R7.3 - incorporates the changes resulting for the Class 2 Permit modification entitled "Revised Waste Analysis Plan Waste Characterization Methods" which was approved by New Mexico Environment Department (NMED) on March 13, 2013</p> <p>R7.4 - incorporate organizational changes to reflect the transition to Nuclear Waste Partnership (NWP), to clarify the hierarchy of quality assurance (QA) program documents, and minor editorial changes.</p>
31	WP 13-QA.03	Quality Assurance Independent Assessment Program	19	22	<p>R20 – Revised to delete requirements to enter external assessment findings in CTS throughout the document and update organization names in accordance with MD 1.1.</p> <p>R21 – Removed last bullet of lead assessor responsibilities and last bullet of surveillor responsibilities in Section 2, added provisions to document findings corrected during assessment on the WIPP Form in accordance with WP 04-IM1000 in Section 5.0 and 6.0 (CBFO CAR 12-020), Deleted attachment 9, and added reference to WP 09-CN3025 in Section 4.3 and deleted Attachment 10, Concerns Form and its mention in Section 5.0.</p>