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Department of Energy

memorandum

Carlsbad Field Office
Carlsbad, New Mexico 88221

DATE: AUG 19 2014

REPLY TO ATTN OF: CBFO:QAD:MPN:LEC:14-1288:UFC 2300.00

SUBJECT: Transmittal of Interim Audit Report A-14-29, ORNL/CCP VE and MILCC2 NDA Activities

TO: Laura Wilkerson, DOE-OR

The Carlsbad Field Office (CBFO) conducted Audit A-14-29 of the Oak Ridge National Laboratory (ORNL), and services of the Nuclear Waste Partnership LLC Central Characterization Program (CCP) for the certification of contact-handled transuranic waste visual examination (VE) and Mobile ISOCS (in-situ object counting system) Large Container Counter (MILCC2) nondestructive assay (NDA) characterization activities on July 29-30, 2014. The Interim Audit Report is attached.

The audit team concluded that, overall, the ORNL/CCP programs evaluated are adequate relative to the flow-down of requirements, and the technical activities evaluated are satisfactorily implemented and effective in all areas. No Corrective Action Reports were issued as a result of the audit. The audit team offered one Recommendation to ORNL/CCP management for consideration.

If you have any questions concerning the attached report, please contact me at (575) 234-7483.

Martin P. Navarrete
Senior Quality Assurance Specialist

Attachment

cc: w/attachment

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A.J. Fisher, NWP/CCP	ED	D. Harvill, CTAC	ED
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W. Ledford, NWP/CCP	ED	Site Documents	ED
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*ED denotes electronic distribution

U.S. DEPARTMENT OF ENERGY
CARLSBAD FIELD OFFICE

INTERIM AUDIT REPORT

OF THE

OAK RIDGE NATIONAL LABORATORY
CENTRAL CHARACTERIZATION PROGRAM

FOR

WASTE CHARACTERIZATION ACTIVITIES IN ACCORDANCE WITH THE HAZARDOUS WASTE FACILITY PERMIT

OAK RIDGE, TENNESSEE
and CARLSBAD, NEW MEXICO

AUDIT NUMBER A-14-29

JULY 29 – 30, 2014

Prepared by: _____ **Date:** 8/12/14
Berry D. Pace, CTAC
Audit Team Leader

Approved by: _____ for **Date:** 8-18-14
Michael R. Brown, Director
CBFO Quality Assurance Division

1.0 EXECUTIVE SUMMARY

U.S. Department of Energy (DOE) Carlsbad Field Office (CBFO) Audit A-14-29 was performed to evaluate the adequacy, implementation, and effectiveness of established programs for transuranic (TRU) waste characterization activities performed for the Oak Ridge National Laboratory (ORNL) by the Nuclear Waste Partnership LLC (NWP) Central Characterization Program (CCP). The audit team evaluated the programs, procedures, and processes for characterizing contact-handled (CH) Summary Category Groups (SCGs) S3000 solids, S4000 soils/gravel, and S5000 debris wastes utilizing the Mobile ISOCS (in-situ object counting system) Large Container Counter (MILCC2) nondestructive assay (NDA) system, and CH SGC S5000 debris waste utilizing the visual examination (VE) process. The audit was conducted relative to the requirements of the Waste Isolation Pilot Plant (WIPP) Hazardous Waste Facility Permit (HWFP), the *CBFO Quality Assurance Program Document* (QAPD), and the *Transuranic Waste Acceptance Criteria for the Waste Isolation Pilot Plant* (WAC).

Audit activities were conducted at ORNL TRU Waste Processing Center (TWPC) facilities in Oak Ridge, Tennessee, and at the Skeen-Whitlock Building in Carlsbad, New Mexico, July 29 – 30, 2014. Overall, the audit team concluded that the ORNL/CCP technical and quality assurance (QA) programs evaluated were adequately established for compliance with applicable upper-tier requirements, satisfactorily implemented, and effective in achieving the desired results.

The audit team identified one minor concern during the audit. This concern was in the area of VE and was offered for management consideration as a Recommendation by the audit team (see section 6.4).

2.0 SCOPE AND PURPOSE

2.1 Scope

The scope of the audit included evaluations for the adequacy, implementation, and effectiveness of the technical and QA activities performed by NWP CCP at ORNL for characterization and certification of CH SCG S3000 solids waste, CH SCG S4000 soils/gravel waste, and CH SGC S5000 debris waste. The following areas were evaluated:

General

- Changes in Programs or Operations
- New Programs or Activities Being Implemented
- Changes in Key Personnel

Quality Assurance

- Personnel Qualification and Training
- Nonconformances
- Records

Technical

- Visual Examination (VE)
- Nondestructive Assay (NDA)

The evaluation of the adequacy of ORNL/CCP documents was based on current versions of the following documents:

Waste Isolation Pilot Plant Hazardous Waste Facility Permit NM4890139088-TSDF

Quality Assurance Program Document (QAPD), DOE/CBFO-94-1012

Transuranic Waste Acceptance Criteria for the Waste Isolation Pilot Plant (WAC), DOE/WIPP-02-3122

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

CCP Transuranic Waste Characterization Quality Assurance Project Plan (QAPjP), CCP-PO-001

CCP Transuranic Waste Certification Plan, CCP-PO-002

Related CCP QA and technical implementing procedures

2.2 Purpose

The purpose of the audit was to determine the degree of adequacy and effective implementation of program requirements for the characterization and certification of CH SCG S3000 solids waste, CH SCG S4000 soils/gravel, and CH SCG S5000 debris wastes waste at the ORNL.

3.0 AUDIT TEAM AND OBSERVERS

AUDITORS/TECHNICAL SPECIALISTS

Martin Navarrete	Management Representative, CBFO Quality Assurance Division
Berry Pace	Audit Team Leader, CBFO Technical Assistance Contractor (CTAC)
Greg Knox	Auditor, CTAC
Porf Martinez	Auditor, CTAC
Tammy Ackman	Auditor, CTAC
Mike Noland	Auditor, CTAC
Rick Castillo	Technical Specialist, CTAC
James Oliver	Technical Specialist, CTAC

OBSERVERS

Ricardo Maestas	New Mexico Environment Department (NMED)
Tom Morgan	CBFO TRU Sites and Transportation Division (TSTD)
Dale Bignell	CTAC (requested by TSTD)

4.0 AUDIT PARTICIPANTS

The ORNL/CCP individuals involved in the audit process are identified in Attachment 1. A pre-audit meeting was held on July 29, 2014, at the TWPC in Oak Ridge, Tennessee, and at the Skeen-Whitlock Building in Carlsbad, New Mexico. Daily management briefings were held to update ORNL/CCP management and staff on audit progress and identified concerns. A post-audit meeting was held on July 30, 2014, at the TWPC in Oak Ridge, Tennessee, and at the Skeen-Whitlock Building in Carlsbad, New Mexico.

Attachment 2 contains a summary table of audit results. Attachment 3 contains a list of ORNL/CCP documents audited. Attachment 4 lists the processes and equipment evaluated during the audit. Audit activities, including objective evidence reviewed, are described below.

5.0 SUMMARY OF AUDIT RESULTS

5.1 Program Adequacy, Implementation, and Effectiveness

This audit was performed to assess the capability of ORNL/CCP to characterize and certify CH SCG S3000 solids waste, CH SCG S4000 soils/gravel, and CH SCG S5000 debris waste for compliance with the requirements specified in the WIPP HWFP Waste Analysis Plan (WAP), the WIPP WAC, and the QAPD. The characterization methods assessed were NDA utilizing the MILCC2 and VE.

The audit team concluded that, based on personnel interviews, observance of operations, and review of associated documentation and records, the ORNL/CCP TRU waste characterization program and activities for certifying CH SCG S3000 solids waste, CH SCG S4000 soils/gravel, and CH SCG S5000 debris waste are adequately established, satisfactorily implemented, and effective in achieving the desired results.

5.2 General

5.2.1 Results of Previous Audits

The results of the last CBFO audit of ORNL/CCP (A-14-03) were examined. CBFO Corrective Action Report (CAR) 14-009 was initiated, which identified a condition adverse to quality when an obsolete version of an acceptable knowledge summary report was being used during VE. The audit team did not identify a similar/same condition during the course of this audit, which suggests that the corrective actions taken in response to CAR 14-009 were effective in precluding recurrence.

5.2.2 Changes in Programs or Operations

The changes in programs and operations at ORNL were the addition of the MILCC2 unit for NDA and the addition of CH VE operations, both of which were subject to evaluation during this audit.

5.2.3 New Programs or Activities Being Implemented

ORNL/CCP introduced the MILCC2 NDA system and VE operations for characterizing CH waste.

5.2.4 Changes in Key Personnel

No changes have occurred since Audit A-14-03. Mr. Andrew Stallings still serves as the vendor project manager (VPM) and Ms. Beverly Schrock continues to serve as the site project manager (SPM).

5.3 Quality Assurance Activities

The audit team evaluated the QA elements for personnel qualification and training, nonconformances, and records for compliance with requirements in the HWFP WAP. The evaluation results for each area audited are described below.

5.3.1 Personnel Qualification and Training

The audit team conducted interviews with responsible personnel and reviewed implementing procedure CCP-QP-002, Rev. 37, *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, NDA, and SPMs were examined to verify compliance with associated requirements and to confirm that personnel were appropriately trained/qualified. Record reviews included NDA Operator/Independent Technical Reviewer (ITR) for the MILCC2 system qualification cards; NDA Operators/ITRs; NDA Expert Analyst for the MILCC2 system qualification cards; VE Operator/ITRs; VE Expert (VEE) appointment documentation; and SPM qualification cards. The audit team also reviewed the ORNL Program List of Qualified Individuals dated July 24, 2014.

The procedures reviewed and objective evidence assembled provided evidence to confirm that the applicable requirements for personnel qualification and training were adequately established for compliance with upper-tier requirements, satisfactorily implemented, and effective in achieving the desired results. No concerns were identified.

5.3.2 Nonconformances

The audit team reviewed implementing procedure CCP-QP-005, Rev. 24, *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 QA engineer; reviewed the CH VE Nonconformance Report Log; the NDA NCR Log; and randomly selected the following nonconformance reports (NCRs) for review:

NCR-ORNL-0159-14, Rev. 0
NCR-ORNL-0162-14, Rev. 0
NCR-ORNL-0260-14, Rev. 0
NCR-ORNL-0256-14, Rev. 0
NCR-ORNL-0702-14, Rev. 0
NCR-ORNL-0803-14, Rev. 0

The team concluded that deficiencies are being appropriately documented and tracked through resolution as required. There were no NCRs deemed reportable to the Permitees 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 Integrated Data Center (IDC) and on the CCP NCR Logs.

The procedures reviewed and objective evidence assembled provided evidence to confirm that the applicable requirements for nonconformances are adequately established for compliance with upper-tier requirements, satisfactorily implemented, and effective in achieving the desired results. No concerns were identified.

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-PO-001, Rev. 21, *CCP Transuranic Waste Characterization Quality Assurance Project Plan*; CCP-PO-002, Rev. 27, *CCP Transuranic Waste Certification Plan*; CCP-QP-008, Rev. 22, *CCP Records Management*, and CCP-QP- 028, Rev. 15, *CCP Records Filing, Inventorying, Scheduling, and Dispositioning.* Results of the review indicate that the procedures adequately address upper-tier requirements.

Control of records was verified through review of the CH Records Inventory and Disposition Schedule dated August 1, 2013 and through interview with responsible personnel.

The procedures reviewed and objective evidence assembled and evaluated during the audit provided evidence that the applicable requirements for QA records are adequately

established for compliance with upper-tier requirements, satisfactory in the implementation of these requirements, and effective in achieving the desired results. The audit team determined that Records activities were adequate, satisfactorily implemented, and effective.

5.4 Technical Activities

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

5.4.1 Visual Examination

The audit team evaluated the adequacy, implementation, and effectiveness of the ORNL/CCP VE characterization process for CH SCG S5000 debris waste.

The audit team conducted interviews with responsible personnel and reviewed implementing procedures CCP-TP-113, Rev. 18, *CCP Standard Contact-Handled Waste Visual Examination*, and CCP-QP-002, Rev. 37, *CCP Training and Qualification Plan*, to determine the degree to which the procedures adequately address upper-tier requirements. Results of the review indicate that the procedures adequately address upper-tier requirements.

ORNL/CCP uses the two-operator method when performing VE characterization. The two qualified operators visually examine the waste as it is placed into containers. The audit team interviewed VE operators and the VEE. The audit team also examined the VE operational logbook (CCP-ORNL-VE-001) and verified logbook entries were logged correctly and reviewed by the VPM as required. During the audit, the audit team toured the TWPC Hot Cell Facility and observed VE operations being performed on waste from container X10C04028986 into output container X10C0402898L1.

The audit team offered one recommendation for consideration to CCP management. The audit team recommended that the VE operators record the verification of the output drum as being empty on the VE Data Sheet prior to initiating the VE process (see Recommendation 1 in section 6.4).

The audit team examined the following CH VE Batch Data Reports (BDRs) generated from operations performed in the TWPC Hot Cell Facility to verify implementation and compliance with the requirements in CCP-TP-113:

- ORNLCHVE0101
- ORNLCHVE0102
- ORNLCHVE0103
- ORNLCHVE0104
- ORNLCHVE0108
- ORNLCHVE0109
- ORNLCHVE0110

The procedure reviews, field observations, and document reviews provided evidence that the applicable requirements for VE are adequately established for compliance with upper-tier requirements, satisfactorily implemented, and effective in achieving the desired results.

5.4.2 Nondestructive Assay

The audit team evaluated the adequacy, implementation, and effectiveness of NDA activities at ORNL to characterize CH SCGs S3000 solids waste, S4000 soils/gravel waste, and S5000 debris waste using the MILCC2.

The audit team reviewed procedures CCP-TP-048, Rev. 16, *CCP ORNL NDA System Data Reviewing, Validating, and Reporting Procedure*, CCP-TP-076, Rev. 1, *CCP Operating the Mobile ISOCS Large Container Counter Using NDA 2000*, and CCP-TP-077, Rev. 1, *CCP Calibrating the Mobile ISOCS Large Container Counter Using NDA 2000*, to determine the degree to which they address applicable upper-tier requirements. Additional reviews included the associated calibration reports and measurement uncertainty reports. Results of the review indicate that the procedures adequately address upper-tier requirements.

BDRs reviewed included:

- OR-MILCC2-0002
- OR-MILCC2-0005
- OR-MILCC2-0008
- OR-MILCC2-0009
- OR-MILCC2-0010
- OR-MILCC2-0019
- OR-MILCC2-0023
- OR-MILCC2-0024

The audit team interviewed operators, observed actual measurement operations, and interviewed ORNL/CCP representatives to verify compliance with operating procedures and governing requirements applicable to CH NDA contained in DOE/CBFO-94-1012, *CBFO Quality Assurance Program Document* (QAPD), CCP-PO-002, *CCP Transuranic Waste Certification Plan*, and DOE/WIPP-02-3122, *Transuranic Waste Acceptance Criteria* (WAC).

ORNL/CCP successfully participated in Performance Demonstration Program Cycle 21A that included four matrices (combustibles, glass, sludge, and metals) and thee TRU alpha activity ranges (combustibles at mid-low (> 0.02 to 0.2 curies [Ci]), glass and metals at mid-high (> 0.2 to 2.0 Ci), and sludge at high (> 2.0 Ci).

ORNL/CCP performed a single calibration verification documented in CI-MILCC2-NDA-1004, Rev. 0, *Calibration Verification Report for the MCS MILCC2*, dated April 15, 2014. The audit team reviewed this document and interviewed

ORNL/CCP staff about the cause and resolution of the issue that led to the performance of calibration verification. The audit team found that the description of the cause and resolution were technically adequate.

The procedure reviews, field observations, and document reviews provided evidence that the applicable requirements for NDA are adequately established for compliance with upper-tier requirements, satisfactorily implemented, and effective in achieving the desired results. No concerns were identified.

6.0 CORRECTIVE ACTIONS, OBSERVATIONS, AND RECOMMENDATIONS

6.1 Corrective Action Reports

During the audit, the audit team may identify conditions adverse to quality (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 CARs were issued as a result of this 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 Management Representative evaluate the CAQs to determine if they are significant. Once a determination is made that the CAQ is not significant, the audit team member, in conjunction with the ATL and the CBFO QA Management Representative, determines if the CAQ is a minor and isolated case requiring only remedial action and therefore can be corrected during the audit.

Upon determination that the CAQ is minor and isolated, the audit team member, in conjunction with the ATL and the CBFO QA Management 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 Management 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 CAQs were identified and corrected during this audit.

6.3 Observations

During the audit, the audit team may identify potential problems that should be communicated to the audited organization. The audit team members, in conjunction with the ATL, evaluate these conditions and classify them as Observations using the following definition:

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

Once a determination is made, the audit team member, in conjunction with the ATL, categorizes the condition appropriately.

No Observations were identified during this audit.

6.4 Recommendations

During the audit, the audit team may identify suggestions for improvement that should be communicated to the audited organization. The audit team members, in conjunction with the ATL, evaluate these conditions and classify them as Recommendations using the following definition:

Recommendations – Suggestions that are directed toward identifying opportunities for improvement and enhancing methods of implementing requirements.

Once a determination is made, the audit team member, in conjunction with the ATL, categorizes the condition appropriately.

The audit team identified the following Recommendation during this audit.

Recommendation 1

It is recommended that the VE operators record the verification of the output drum as being empty on the VE Data Sheet prior to initiating the VE process.

7.0 LIST OF ATTACHMENTS

Attachment 1: Personnel Contacted During the Audit
Attachment 2: Summary Table of Audit Results
Attachment 3: Table of Audited Documents
Attachment 4: List of Processes and Equipment Reviewed

PERSONNEL CONTACTED DURING AUDIT A-14-29				
NAME	**ORG/TITLE**	**PREAUDIT MEETING**	**CONTACTED DURING AUDIT**	**POST-AUDIT MEETING**
Dale Bignell	CTAC Observer	X		X
Michele Billett	NWP/CCP NTPC Training Coordinator		X	
Jason Cofer	NWP/CCP VE		X	
Anthony Harley	NWP/CCP VEE	X	X	X
LaTrana Harmon	NWP/CCP QA	X		X
Laura Jones	NWP/CCP QAE		X	
Scott Kranker	TWPC STR			X
Wayne Ledford	NWP/CCP QA Specialist			X
Ricardo Maestas	NMED Observer	X		
Shelly Martinez	NWP/CCP CE RTR/VE	X	X	X
Derek Matheny	NWP/CCP VE		X	
Kevin Meyer	MCS EA	X		
Tom Morgan	CBFO/TSTD Certification Manager	X		X
Jim Morrison	NWP/CCP IDC Group		X	
Martin Navarrete	CBFO QA Representative	X		X
Sheila Pearcy	NWP/CCP NTPC Records Manager		X	
Ron Reeves	NWP/CCP Project Manager	X	X	X
Beverly Schrock	NWP/CCP SPM		X	X
Mike Sensibaugh	NWP/CCP Operations Manager	X		X
Andrew Stallings	NWP/CCP VPM	X	X	X
Chuck Wallace	NWP/CCP VE		X	
Veronica Waldram	NWP/CCP QA		X	X
Ronald Whitson	MCS NDA Lead	X		X

SUMMARY TABLE OF AUDIT RESULTS

QA / Technical Elements	Concern Classification				QA Evaluation		Technical Evaluation
	CARs	CDAs	Obs	Rec	Adequacy	Implementation	Effectiveness
Visual Examination				X	A	S	E
Nondestructive Assay					A	S	E
QA General C6-1 Training					A	S	E
QA General C6-1 NCRs / Records / Doc Control					A	S	E
TOTALS	0	0	0	1	A	S	E

Definitions

E = Effective
S = Satisfactory
I = Indeterminate
M = Marginal
U = Unsatisfactory

CAR = Corrective Action Report
CDA = Corrected During Audit
NE = Not Effective

Obs – Observation
Rec = Recommendation
A = Adequate
NA = Not Adequate

TABLE OF AUDITED DOCUMENTS			
NUMBER	**PROCEDURE NUMBER**	**REV**	**PROCEDURE TITLE**
1.	CCP-PO-001	21	CCP Transuranic Waste Characterization Quality Assurance Project Plan
2.	CCP-PO-002	27	CCP Transuranic Waste Certification Plan
3.	CCP-PO-005	24	CCP Conduct of Operations
4.	CCP-PO-027	5	CCP/TRU Waste Processing Center/Oakridge National Laboratory Interface Document
5.	CCP-QP-002	37	CCP Training and Qualification Plan
6.	CCP-QP-005	24	CCP TRU Nonconforming Item Reporting and Control
7.	CCP-QP-008	22	CCP Records Management
8.	CCP-QP-010	24	CCP Document Preparation, Approval, and Control
9.	CCP-QP-016	19	CCP Control of Measuring and Testing Equipment
10.	CCP-QP-017	4	CCP Identification and Control of Items
11.	CCP-QP-021	10	CCP Surveillance Program
12.	CCP-QP-022	14	CCP Software Quality Assurance Plan
13.	CCP-QP-028	15	CCP Records Filing, Inventorying, Scheduling, and Dispositioning
14.	CCP-TP-048	16	CCP ORNL NDA System Data Reviewing, Validating, and Reporting Procedure
15.	CCP-TP-058	5	CCP NDA Performance Demonstration Program
16.	CCP-TP-076	1	CCP Operating the Mobile ISOCS Large Container Counter Using NDA 2000
17.	CCP-TP-077	1	CCP Calibrating the Mobile ISOCS Large Container Counter Using NDA 2000
18.	CCP-TP-103	12	CCP Data Reviewing, Validating, and Reporting Procedure for the NDA Counters at LANL Using NDA 2000
19.	CCP-TP-113	18	CCP Standard Contact-Handled Waste Visual Examination
20.	CCP-TP-139	5	CCP In Situ Object Counting System Nondestructive Assay Operating Procedure
21.	WP 13-QA.03	23	Quality Assurance Independent Assessment Program
22.	WP 15-GM1002	2	Issues Management Processing of WIPP Forms

List of Processes and Equipment Reviewed

WIPP #	Process/Equipment Description	Applicable to the Following Waste Streams/Groups of Waste Streams	Currently Approved by NMED	Currently Approved by Environmental Protection Agency
PREVIOUSLY APPROVED PROCESSES OR EQUIPMENT				
16VE1	Visual Examination Procedure: CCP-TP-113 Description – CH Characterization performed utilizing Visual Examination (VE) and Acceptable Knowledge (AK)	Soils/Gravel (S4000) Debris (S5000)	NO	YES
N/A	Quality Assurance Program	Solids (S3000) Soils/Gravel (S4000) Debris (S5000)	N/A	YES
NEW PROCESSES OR EQUIPMENT				
N/A	Nondestructive Assay Mobile In-Situ Object Counting System Large Container Counter (MILCC2) Procedures – CCP-TP-076, CCP-TP-077, CCP-TP-139	Solids (S3000) Soils/Gravel (S4000) Debris (S5000)	N/A	NO
DEACTIVATED PROCESSES OR EQUIPMENT				
NONE				