



Department of Energy
 Albuquerque Operations Office
 Waste Isolation Pilot Plant Project Office
 P. O. Box 3090
 Carlsbad, New Mexico 88221

Beatty
Kelly
Barbara
file w/lf

JAN 13 1994

Ms. Judith M. Espinosa, Secretary
 State of New Mexico Environment Department
 Harold Runnels Building
 P.O. Box 26110
 Santa Fe, New Mexico 87502

Dear Ms. Espinosa:

During the time period of December 8 through December 20, 1993, the U.S. Department of Labor Mine Safety and Health Administration (MSHA) conducted the First Fiscal Year (FY94) Courtesy Assistance Visit (CAV) as specified in the WIPP Land Withdrawal Act. The visit included a comprehensive safety and health inspection and resulted in the issuance of eight Nonpenalty CAV notices. Copies of these CAV notices are enclosed. All of these CAV notices were issued in regard to surface concerns which were immediately abated. No CAV notices were issued regarding the underground facility.

The inspection was performed by Federal MSHA Inspector Leroy Powers.

If you have any questions concerning this subject, please contact L. Bruce Lilly at (505) 234-8136.

Sincerely,

George E. Dials
 George E. Dials, Manager
 Carlsbad Area Office

Enclosure

- cc w/enclosure:
 C&C File
 E. Maestas, CAO-AL
 J. Schinkle, SPD-AL
 B. Lilly, CAO
 S. Warren, WTAC
 P. McCasland, NMED
 J. Garcia, WID

JAN 2 1994

940102





| | | | | | | | | | |
|--|----|--------------------|----|---------------------------------|--|--|--|-----------|--|
| 1. Date | Mo | Da | Yr | 2. Event Number | | | | | |
| | 1 | 20 | 89 | 3 | | | | | |
| 3. Served To | | | | 4. Operator | | | | | |
| Bruce Lilly - DOE SFTY. | | | | DOE | | | | | |
| 5. Mine | | | | 6. Mine ID | | | | | |
| WIPP | | | | - - - - - (Contractor) | | | | | |
| 7. Violation: | | A. Section of Act | | B. Part/Section of Title 30 CFR | | | | | |
| | | 104-(a) | | 057.12001 | | | | | |
| 8. Type of Inspection (activity code) | | 9. Primary or Mill | | 10. Condition | | | | | |
| 065 | | M | | Backup Generator Rm #1 | | | | | |
| A 480/120/240 volt, 3 KVA transformer was protected on the primary side by a 20 AMP circuit breaker which did not protect against excessive overcurrent and overheating. | | | | | | | | | |
| 11. Signature | | | | | | | | AR Number | |
| Leroy Powers | | | | | | | | 11117 | |



| | | | | | | | | | |
|--|----|--------------------|----|---------------------------------|--|--|--|-----------|--|
| 1. Date | Mo | Da | Yr | 2. Event Number | | | | | |
| | 1 | 20 | 89 | 3 | | | | | |
| 3. Served To | | | | 4. Operator | | | | | |
| Bruce Lilly - DOE safety | | | | DOE | | | | | |
| 5. Mine | | | | 6. Mine ID | | | | | |
| WIPP | | | | - - - - - (Contractor) | | | | | |
| 7. Violation: | | A. Section of Act | | B. Part/Section of Title 30 CFR | | | | | |
| | | 104-(a) | | 057.12001 | | | | | |
| 8. Type of Inspection (activity code) | | 9. Primary or Mill | | 10. Condition | | | | | |
| 065 | | M | | Backup Generator Room #2 | | | | | |
| A 480/120/240 volt, 3 KVA transformer was protected on the primary side by a 20 Amp circuit breaker which did not protect against excessive overcurrent and overheating. | | | | | | | | | |
| 11. Signature | | | | | | | | AR Number | |
| Leroy Powers | | | | | | | | 11117 | |



| | | | | | | | | | |
|---|--------------------|------------------|--------------------|---------------------------------|-------------|--|--|--|--|
| 1. Date | Mo | Da | Yr | 2. Event Number | | | | | |
| | 11 | 20 | 89 | | | | | | |
| 3. Served To | Bruce Lilly - sfty | | | | 4. Operator | | | | |
| | | | | DOE | | | | | |
| 5. Mine | WIPP | | | | 6. Mine ID | | | | |
| | | | | - - - - - | | | | | |
| 7. Violation: | A. Section of Act | | | B. Part/Section of Title 30 CFR | | | | | |
| | 104-(a) | | | 057.11001 | | | | | |
| 8. Type of Inspection (activity code) | 065 | | 9. Primary or Mill | | | | | | |
| | | MN Substation #7 | | | | | | | |
| 10. Condition | | | | | | | | | |
| The lid was off of a 24" deep x 14" square ground rod well and created a tripping hazard. | | | | | | | | | |

| | |
|-------------------|-----------|
| 11. Signature | AR Number |
| <i>Lew Powers</i> | 1117 |

MSHA Form 4000-51, Nov 85 (Revised)



| | | | | | | | | | |
|--|--------------------------|-------------------------------|--------------------|---------------------------------|-------------|--|--|--|--|
| 1. Date | Mo | Da | Yr | 2. Event Number | | | | | |
| | 11 | 20 | 89 | | | | | | |
| 3. Served To | Bruce Lilly - DOE safety | | | | 4. Operator | | | | |
| | | | | DOE | | | | | |
| 5. Mine | WIPP | | | | 6. Mine ID | | | | |
| | | | | - - - - - | | | | | |
| 7. Violation: | A. Section of Act | | | B. Part/Section of Title 30 CFR | | | | | |
| | 104-(a) | | | 057.11001 | | | | | |
| 8. Type of Inspection (activity code) | 065 | | 9. Primary or Mill | | | | | | |
| | | MMotor control center RM 413A | | | | | | | |
| 10. Condition | | | | | | | | | |
| 2-2 1/2" wide x 3" high door stops were mounted on the outside cement slab. These stops were in a cross travelway and created a tripping hazard. | | | | | | | | | |

| | |
|-------------------|-----------|
| 11. Signature | AR Number |
| <i>Lew Powers</i> | 1117 |

MSHA Form 4000-51, Nov 85 (Revised)

GAV-Nonpenalty

U.S. Department of Labor
Mine Safety and Health Administration



| | | | | | | | | | | |
|--|----|-------------------|----|-----------------------|---------------------------------|--|--|--|--|-----------|
| 1. Date | Mo | Da | Yr | 2. Event Number | | | | | | |
| | 11 | 20 | 89 | 3 | | | | | | |
| 3. Served To | | | | | 4. Operator | | | | | |
| Bruce Lilly - DOE SFTY | | | | | DOE | | | | | |
| 5. Mine | | | | | 6. Mine ID | | | | | |
| WIPP | | | | | - (Contractor) | | | | | |
| 7. Violation: | | A. Section of Act | | | B. Part/Section of Title 30 CFR | | | | | |
| | | 104-(a) | | | 057.11001 | | | | | |
| 8. Type of Inspection (activity code) | | | | 9. Primary or Mill | | | | | | |
| 065 | | | | M Conex bldg # 235-19 | | | | | | |
| 10. Condition | | | | | | | | | | |
| Steel rods and channel iron were stacked in the aisle walkway and created a tripping hazard. | | | | | | | | | | |
| 11. Signature | | | | | | | | | | AR Number |
| Lew Powers | | | | | | | | | | 11117 |

MSHA Form 4000-51, Nov 85 (Revised)

CAV-Nonpenalty

U.S. Department of Labor
Mine Safety and Health Administration



| | | | | | | | | | | |
|--|----|-------------------|----|---------------------------------------|---------------------------------|--|--|--|--|-----------|
| 1. Date | Mo | Da | Yr | 2. Event Number | | | | | | |
| | 11 | 20 | 89 | 3 | | | | | | |
| 3. Served To | | | | | 4. Operator | | | | | |
| Bruce Lilly | | | | | DOE | | | | | |
| 5. Mine | | | | | 6. Mine ID | | | | | |
| WIPP | | | | | - (Contractor) | | | | | |
| 7. Violation: | | A. Section of Act | | | B. Part/Section of Title 30 CFR | | | | | |
| | | 104-(a) | | | 057.12032 | | | | | |
| 8. Type of Inspection (activity code) | | | | 9. Primary or Mill | | | | | | |
| 065 | | | | M North Central ofc. Trailer location | | | | | | |
| 10. Condition | | | | | | | | | | |
| The cover on transformer TR04-7A was loose and open at the bottom, exposing hot bus about 8 inches behind 3/4 inch openings. | | | | | | | | | | |
| 11. Signature | | | | | | | | | | AR Number |
| Lew Powers | | | | | | | | | | 11117 |

MSHA Form 4000-51, Nov 85 (Revised)

CAV-Nonpenalty

U.S. Department of Labor
Mine Safety and Health Administration



| | | | | | | | | | | |
|--|----|-------------------|--------------------|---------------------------------|--|--|--|--------------|--|--|
| 1. Date | Mo | Da | Yr | 2. Event Number | | | | | | |
| | 12 | 14 | 93 | | | | | | | |
| 3. Served To | | | | 4. Operator | | | | | | |
| Bruce Lilly - safety | | | | DOE | | | | | | |
| 5. Mine | | | | 6. Mine ID | | | | (Contractor) | | |
| WIPP | | | | - | | | | | | |
| 7. Violation: | | A. Section of Act | | B. Part/Section of Title 30 CFR | | | | | | |
| | | 104-2 | | 057.12032 | | | | | | |
| 8. Type of Inspection (activity code) | | | 9. Primary or Mill | | | | | | | |
| 065 | | | M Red Path office | | | | | | | |
| 10. Condition | | | | | | | | | | |
| A cover was missing from a 110 volt duplex receptacle in the North office. | | | | | | | | | | |

11. Signature

Lew Powers

AR Number

11117

MSHA Form 4000-51, Nov 85 (Revised)

CAV-Nonpenalty

U.S. Department of Labor
Mine Safety and Health Administration



| | | | | | | | | | | |
|---|----|-------------------|--|---------------------------------|--|--|--|--------------|--|--|
| 1. Date | Mo | Da | Yr | 2. Event Number | | | | | | |
| | 12 | 14 | 93 | | | | | | | |
| 3. Served To | | | | 4. Operator | | | | | | |
| Bruce Lilly - safety | | | | DOE | | | | | | |
| 5. Mine | | | | 6. Mine ID | | | | (Contractor) | | |
| WIPP | | | | - | | | | | | |
| 7. Violation: | | A. Section of Act | | B. Part/Section of Title 30 CFR | | | | | | |
| | | 104-2 | | 057.12032 | | | | | | |
| 8. Type of Inspection (activity code) | | | 9. Primary or Mill | | | | | | | |
| 065 | | | M Maint. Lunch room (old Welding shop) | | | | | | | |
| 10. Condition | | | | | | | | | | |
| An improper circuit breaker hole cover was used in the main distribution panel. | | | | | | | | | | |

11. Signature

Lew Powers

AR Number

11117

MSHA Form 4000-51, Nov 85 (Revised)