

Virginia Electric and Power Company
North Anna Power Station
P. O. Box 402
Mineral, Virginia 23117

January 20, 2004

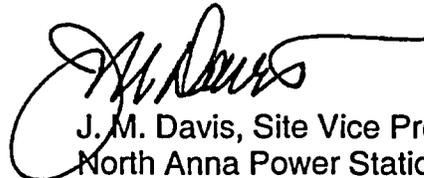
U. S. Nuclear Regulatory Commission
Attention: Document Control Desk
Washington, D. C. 20555-0001

Serial No.: 03-624A
NAPS: JHL
Docket Nos.: 50-338, 339
License Nos.: NPF-4, 7

Dear Sirs:

Licensee Event Report (LER) No. 50-338, 339/2003-005-00 applicable to North Anna Power Station Units 1 and 2 was submitted on January 7, 2004. Due to an administrative error, the LER number on NRC Form 366 was inadvertently entered as 2003-002-00 in lieu of 2003-005-00. Attached is a revised NRC Form 366 with the corrected LER number. Please substitute the revised NRC Form 366 in the January 7, 2004 LER submittal.

Very truly yours,



J. M. Davis, Site Vice President
North Anna Power Station

Enclosure

Commitments contained in this letter: None

cc: United States Nuclear Regulatory Commission
Region II
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW, Suite 23T85
Atlanta, Georgia 30303-8931

Mr. M. T. Widmann
NRC Senior Resident Inspector
North Anna Power Station

IE22

LICENSEE EVENT REPORT (LER)

(See reverse for required number of digits/characters for each block)

Estimated burden per response to comply with this mandatory information collection request: 50 hours. Reported lessons learned are incorporated into the licensing process and fed back to industry. Send comments regarding burden estimate to the Records Management Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to bjs1@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202 (3150-0104), Office of Management and Budget, Washington, DC 20503. If a means used to impose information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

FACILITY NAME (1) NORTH ANNA POWER STATION , UNIT 1	DOCKET NUMBER (2) 05000 - 338	PAGE (3) 1 OF 5
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TITLE (4)
Inoperable Hydrogen Recombiner Due to Inadequate Work Practices

EVENT DATE (5)			LER NUMBER (6)			REPORT DATE (7)			OTHER FACILITIES INVOLVED (8)	
MONTH	DAY	YEAR	YEAR	SEQUENTIAL NUMBER	REVISION NUMBER	MONTH	DAY	YEAR	FACILITY NAME	DOCUMENT NUMBER
11	10	2003	2003	-- 005 --	00	01	07	2004	North Anna Power Station, Unit 2	05000-339

OPERATING MODE (9) 1	THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR §: (Check all that apply) (11)										
POWER LEVEL (10) 100 %	<input type="checkbox"/> 20.2201(b)	<input type="checkbox"/> 20.2203(a)(3)(ii)	<input type="checkbox"/> 50.73(a)(2)(ii)(B)	<input type="checkbox"/> 50.73(a)(2)(ix)(A)							
	<input type="checkbox"/> 20.2201(d)	<input type="checkbox"/> 20.2203(a)(4)	<input type="checkbox"/> 50.73(a)(2)(iii)	<input type="checkbox"/> 50.73(a)(2)(x)							
	<input type="checkbox"/> 20.2203(a)(1)	<input type="checkbox"/> 50.36(c)(1)(i)(A)	<input type="checkbox"/> 50.73(a)(2)(iv)(A)	<input type="checkbox"/> 73.71(a)(4)							
	<input type="checkbox"/> 20.2203(a)(2)(i)	<input type="checkbox"/> 50.36(c)(1)(ii)(A)	<input type="checkbox"/> 50.73(a)(2)(v)(A)	<input type="checkbox"/> 73.71(a)(5)							
	<input type="checkbox"/> 20.2203(a)(2)(ii)	<input type="checkbox"/> 50.36(c)(2)	<input type="checkbox"/> 50.73(a)(2)(v)(B)	<input type="checkbox"/> OTHER							
	<input type="checkbox"/> 20.2203(a)(2)(iii)	<input type="checkbox"/> 50.46(a)(3)(ii)	<input type="checkbox"/> 50.73(a)(2)(v)(C)	Specify in Abstract below or in NRC Form 366A							
	<input type="checkbox"/> 20.2203(a)(2)(iv)	<input type="checkbox"/> 50.73(a)(2)(i)(A)	<input type="checkbox"/> 50.73(a)(2)(v)(D)								
	<input type="checkbox"/> 20.2203(a)(2)(v)	<input checked="" type="checkbox"/> X	<input type="checkbox"/> 50.73(a)(2)(i)(B)								
	<input type="checkbox"/> 20.2203(a)(2)(vi)	<input type="checkbox"/> 50.73(a)(2)(i)(C)	<input type="checkbox"/> 50.73(a)(2)(viii)(A)								
	<input type="checkbox"/> 20.2203(a)(3)(i)	<input type="checkbox"/> 50.73(a)(2)(ii)(A)	<input type="checkbox"/> 50.73(a)(2)(viii)(B)								

LICENSEE CONTACT FOR THIS LER (12)

NAME J. M. Davis, Site Vice President	TELEPHONE NUMBER (Include Area Code) (540) 894-2101
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COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT (13)

CAUSE	SYSTEM	COMPONENT	MANUFACTURER	REPORTABLE TO EPIX	CAUSE	SYSTEM	COMPONENT	MANUFACTURER	REPORTABLE TO EPIX

SUPPLEMENTAL REPORT EXPECTED (14)				EXPECTED SUBMISSION DATE (15)	MONTH	DAY	YEAR
YES (If yes, complete EXPECTED SUBMISSION DATE).	<input checked="" type="checkbox"/> X	<input type="checkbox"/> NO					

ABSTRACT (Limit to 1400 spaces, i.e., approximately 15 single-spaced typewritten lines) (16)

On November 10, 2003, at 1030 hours, with Units 1 and 2 operating at 100 percent power, testing of the Unit 2 hydrogen recombiner was being conducted. During testing, the hydrogen recombiner tripped from a low flow condition while attempting to place it in service. An investigation determined that the high and low side isolation valves for the instrument lines to the hydrogen recombiner flow transmitter were closed when they should have been open. This condition existed for greater than the 30-day completion time permitted by Technical Specification 3.6.9. Therefore, this event is reportable pursuant to 10 CFR 50.73 (a)(2)(i)(B) for a condition prohibited by Technical Specifications. The cause of the isolation valves being closed was determined to be inadequate work practices. The isolation valves were subsequently opened and the hydrogen recombiner was successfully started. Testing was satisfactorily completed. This event posed no significant safety implications because no conditions requiring the use of the hydrogen recombiner were experienced during the time the hydrogen recombiner was inoperable. Therefore, the health and safety of the public were not affected by this event.