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December 21, 2010

U.S. Nuclear Regulatory Commission
Document Control Desk
Washington, D.C. 20555

Subject: Oconee Nuclear Station
Docket Nos. 50-269
Licensee Event Report 269/2010-03, Revision 0
Problem Investigation Process No.: O-10-8435

Gentlemen:

Pursuant to 10 CFR 50.73 Sections (a)(1) and (d), attached is Licensee Event Report 269/2010-03, Revision 0, regarding a flow path of Emergency Feedwater being inoperable longer than allowed by Technical Specifications.

This report is being submitted in accordance with 10 CFR 50.73 (a)(2)(i)(B). However, a cause investigation into this event is still in progress; therefore, this report is incomplete. A revision to this report is planned and will be submitted after completion of the cause investigation. There are no other commitments contained in this report. The expected date of submission of the revision is February 17, 2011, however that date is not a commitment.

This event is considered to be of no significance with respect to the health and safety of the public.

Any questions regarding the content of this report should be directed to Randy Todd at 864-873-3418.

Sincerely,

T. Preston Gillespie, Jr., Vice President
Oconee Nuclear Site

Attachment

ITD
NRK

Document Control Desk
Date: December 21, 2010
Page 2

cc: Mr. Luis Reyes
Administrator, Region II
U.S. Nuclear Regulatory Commission
Marquis One Tower
245 Peachtree Center Ave., NE, Suite 1200
Atlanta, GA 30303-1257

Mr. John Stang
Project Manager
U.S. Nuclear Regulatory Commission
Office of Nuclear Reactor Regulation
Washington, D.C. 20555

Mr. Andrew Sabisch
NRC Senior Resident Inspector
Oconee Nuclear Station

INPO (Word File via E-mail)

LICENSEE EVENT REPORT (LER)

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

1. FACILITY NAME Oconee Nuclear Station, Unit 1	2. DOCKET NUMBER 05000- 0269	3. PAGE 1 OF 1
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4. TITLE
Inoperable Emergency Feedwater Flowpath

5. EVENT DATE			6. LER NUMBER			7. REPORT DATE			8. OTHER FACILITIES INVOLVED	
MONTH	DAY	YEAR	YEAR	SEQUENTIAL NUMBER	REV NO	MONTH	DAY	YEAR	FACILITY NAME	DOCKET NUMBER
10	27	2010	2010	- 03	- 0	12	21	2010	None	05000
									FACILITY NAME	DOCKET NUMBER
									None	05000

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

12. LICENSEE CONTACT FOR THIS LER

FACILITY NAME Randy Todd	TELEPHONE NUMBER (Include Area Code) 864-873-3418
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13. COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT

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

14. SUPPLEMENTAL REPORT EXPECTED <input checked="" type="checkbox"/> YES (If yes, complete EXPECTED SUBMISSION DATE) <input type="checkbox"/> NO	15. EXPECTED SUBMISSION DATE	MONTH	DAY	YEAR
		02	17	2011

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

On 10/27/2010 at approximately 2358, the "A" Steam Generator Emergency Feedwater Control Valve (1FDW-315) opened unexpectedly when a test procedure isolated instrument air and auxiliary instrument air to allow stroke testing on the nitrogen (N2) supply only. N2 is the credited pneumatic source. Initial investigation determined that the nitrogen regulator (1N-328) for the "B" bottle supply was inadequately set such that the downstream pressure was zero. 1FDW-315 is designed to fail open upon loss of air/N2, so the valve responded as expected. Operations initially realigned to the "A" supply and exited Technical Specification (TS) 3.7.5 Condition B at 0239 on 10/28/2010. Maintenance reset 1N-328 to the correct pressure setting per procedure on 11/02/2010.

Work history indicated that the regulator had been adjusted during maintenance on 9/5/2010. Thus the potential exists that Unit 1 operated with this train inoperable longer than allowed by TS 3.7.5 Conditions B and D. A cause investigation has been initiated, and this report will be supplemented after it is completed.

This event is considered to have no significance with respect to the health and safety of the public.