

Power Reactor

Event # 46688

Site: FORT CALHOUN		Notification Date / Time: 03/21/2011 13:19 (EDT)	
Unit: 1	Region: 4	State : NE	Event Date / Time: 03/18/2011 (CDT)
Reactor Type: (1) CE		Last Modification: 03/21/2011	
Containment Type: DRY AMB			
NRC Notified by: DONNA GUINN		Notifications: GREG PICK R4DO	
HQ Ops Officer: CHARLES TEAL		PART 21 GROUP	
Emergency Class: NON EMERGENCY			
10 CFR Section:			
21.21	UNSPECIFIED PARAGRAPH		

Unit	Scram Code	RX Crit	Init Power	Initial RX Mode	Curr Power	Current RX Mode
1	N	Yes	100	Power Operation	100	Power Operation

DEFECTIVE KPR-14DG-125 RELAYS DISCOVERED DURING BENCH TESTING

"The following event description is based on information currently available. The condition is reported under 10 CFR 21.21(d)(3)(i).

"Part 21 Report - Potter Brumfield KRP-14DG-125 Relays, supplied by Southern Testing Services (STS) division of Argo Turboserve Corporation (ATC).

"On March 17, 2011, during bench testing of the KRP-14DG-125 Relays, Fort Calhoun Station (FCS) discovered that some of these relays were defective in that one of the contacts would not close properly after energizing and de-energizing the relay coils. If installed in the plant, the improper closure of this contact could defeat the safety function of the relays that provide a signal to the component supported by that contact. This deviation from the design specifications is reportable per 10 CFR 21. FCS does not have any of the affected relays installed in the plant.

"FCS returned the batch of relays to the vendor for further failure modes and effects evaluation and reporting.

"FCS has not provided any of these relays from our stock to any other licensee.

"The vendor and the [NRC] resident inspector have been notified."

JE19
NRK

NRC FORM 361
(12-2000)

U.S. NUCLEAR REGULATORY COMMISSION
OPERATIONS CENTER

**REACTOR PLANT
EVENT NOTIFICATION WORKSHEET**

EN #

NRC OPERATION TELEPHONE NUMBER: PRIMARY -- 301-816-5100 or 800-532-3469*, BACKUPS -- [1st] 301-951-0550 or 800-449-3694*, [2nd] 301-415-0550 and [3rd] 301-415-0553 *Licensees who maintain their own ETS are provided these telephone numbers.

NOTIFICATION TIME	FACILITY OR ORGANIZATION	UNIT	NAME OF CALLER	CALL BACK #
	Ft. Calhoun Station	1	Donna Guinn	402-533-7337

EVENT TIME & ZONE	EVENT DATE	POWER/MODE BEFORE	POWER/MODE AFTER
	03/18/2011	100% 1	100% 1

EVENT CLASSIFICATIONS		1-Hr. Non-Emergency 10 CFR 50.72(b)(1)	<input type="checkbox"/> (v)(A) Safe S/D Capability	AINA	
<input type="checkbox"/> GENERAL EMERGENCY	GEN/AEC	<input type="checkbox"/> TS Deviation	ADEV	<input type="checkbox"/> (v)(B) RHR Capability	AINB
<input type="checkbox"/> SITE AREA EMERGENCY	SIT/AEC	4-Hr. Non-Emergency 10 CFR 50.72(b)(2)	<input type="checkbox"/> (v)(C) Control of Rad Release	AINC	
<input type="checkbox"/> ALERT	ALE/AEC	<input type="checkbox"/> (i) TS Required S/D	ASHU	<input type="checkbox"/> (v)(D) Accident Mitigation	AIND
<input type="checkbox"/> UNUSUAL EVENT	UNU/AEC	<input type="checkbox"/> (iv)(A) ECCS Discharge to RCS	ACCS	<input type="checkbox"/> (xii) Offsite Medical	AMED
<input checked="" type="checkbox"/> 50.72 NON-EMERGENCY	(see next columns)	<input type="checkbox"/> (iv)(B) RPS Actuation (scram)	ARPS	<input type="checkbox"/> (xiii) Loss Comm/Asmt/Resp	ACOM
<input type="checkbox"/> PHYSICAL SECURITY (73.71)	DDD	<input type="checkbox"/> (xi) Offsite Notification	APRE	60-Day Optional 10 CFR 50.73(a)(1)	
<input type="checkbox"/> MATERIAL/EXPOSURE	B???	8-Hr. Non-Emergency 10 CFR 50.72(b)(3)	<input type="checkbox"/> Invalid Specified System Actuation	AINV	
<input type="checkbox"/> FITNESS FOR DUTY	HFT	<input type="checkbox"/> (ii)(A) Degraded Condition	ADEG	Other Unspecified Requirement (Identify)	
<input type="checkbox"/> OTHER UNSPECIFIED REQMT.	(see last column)	<input type="checkbox"/> (ii)(B) Unanalyzed Condition	ALUNA	<input checked="" type="checkbox"/>	10 CFR 21.21(d)(3)(i)
<input type="checkbox"/> INFORMATION ONLY	NNF	<input type="checkbox"/> (iv)(A) Specified System Actuation	AESF	<input type="checkbox"/>	NONR

DESCRIPTION

Include: Systems affected, actuations and their initiating signals, causes, effect of event on plant, actions taken or planned, etc. (Continue on back)

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NOTIFICATIONS	YES	NO	WILL BE	ANYTHING UNUSUAL OR NOT UNDERSTOOD?	<input type="checkbox"/> YES (Explain above)	<input checked="" type="checkbox"/> NO
NRC RESIDENT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
STATE(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DID ALL SYSTEMS FUNCTION AS REQUIRED?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Explain above)
LOCAL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
OTHER GOV AGENCIES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	MODE OF OPERATION UNTIL CORRECTED:	1	ESTIMATED RESTART DATE:
MEDIA/PRESS RELEASE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			n/a
						ADDITIONAL INFO ON BACK
						<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO