	NRC FORM 195	U.S. NU		DOCKET NUMBER 50-305		
	WRC DISTRIBUTION	N FOIL PART 50 DOCKET	MATERIAL	FILE NUMBER INCIDENT REPORT		
f	O: J.G. KEPPLER FROM: WISCONSIN PUBLIC SVC. CORP.		DATE OF DOCUMENT			
		GREEN BAY, WISCONSIN E.W. JAMES		10-22-76 DATE RECEIVED		
			Luinut sonu	10-26-76		
	SORIGINAL SUNCLASS	IFIED	INPUT FORM	NUMBER OF COPIES RECEIVED		
				30		
	LTR. TRANS THE FOLLOWING ACKNOWLEDGE DO NOT REMOV PLANT NAME: KEWAUNEE	LICENSEE EVENT RE CONCERNING SERVIC AINMENT FAN COIL SWITCH LICENSEE EVENT RE CONCERNING TRAIN ACTUATION SIGNAL (1 SIGNED CY. RE (3 PAGES) NOTE: IF PERSONI SEND DIRES		DRT # 76-16, ON 9-23-76 WATER MOTOR VALVE FOR CONTZ NIT 1D NOT OPENING WITH CONTROL DRTT#76=17, ON 9-23-77, 3" FEEDWATER ISOLATION DT OPERATING		
		2001.407.000				
	BRANCH CHIEF.	FOR ACTION/	INFORMATION	SAB 10-28-76		
	W/3 CYS FOR ACTION		······································	· · · · · · · · · · · · · · · · · · ·		
	LIC. ASST.:	SHEPPARD		· ·		
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		INTERNAL [
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-	CASE			·		
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	HANAUER					
	TEDESCO/MACCARY					
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	VOLLMER/ MINCH	·				
	KREGER/J.COLLING	· · · · · · · · · · · · · · · · · · ·				
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		EXTERNAL DISTRIBUTION		CONTROL NUMBER		
	LI'DR: KEWAUNEE, WIS.					
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46-1823.	na mana an ana ang manananan ang mananan ang mananan ang mananan ang mananan ang mananan ang mananan ang manana Rengka (Palabana ang mananana ang mananana ang mananananananananananananananananananan			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		



Mr. J. G. Keppler, Regional Director Office of Inspection & Enforcement Region III U. S. Nuclear Regulatory Commission 799 Roosevelt Road Glen Ellyn, IL 60137

Dear Mr. Kepplar:

Subject: Docket 50-305 Operating License DPR-43 Reportable Occurrences RO 76-16 and RO 76-17

In accordance with the requirements of Technical Specifications, Section 6.9.2, the attached Licensee Event Reports for Reportable Occurrences RO 76-16 and RO 76-17 are submitted. Both reports are the result of compenent failures which are considered to be caused by normal wear from usage. Therefore, the corrective action performed is considered complete end no further action is required.

Very truly yours,

E. W. James Senior Vice President Power Supply & Engineering

EWJ:sne Enc.

cc - Dir, Office of Inspection & Enforcement US NRC, Washington, D. C. 20555 Dir, Office of Management Info & Program Control US NRC, Washington, D. C. 20555

10812

LICENSEE EVENT	REPORT
	(PLEASE PRINT ALL REQUIREO INFORMATION)
LICENSEE NAME 01 W I K N P 1 0 0 - 0 0 0 0 0 - 7 8 9 14 15	LICENSE TYPE TYPE - 0 0 4 1 1 1 1 TYPE 25 26 30 31 32
CATEGORY REPORT TYPE REPORT SOURCE DOCKET NUMBER 01 CON'T P 0 L L 0 5 0 0 3 0 7 8 57 58 59 60 61	EVENT DATE REPORT DATE 5 0 9 2 3 7 6 1 0 2 2 7 6 68 69 74 75 80
EVENT DESCRIPTION	ards surveillance testing. Train "B"
7 8 9 03 feedwater isolation actuation signal did not	BO coperate. An investigation revealed
7 8 9 04 that a BF Belay did not function properly.	BO Train "A" had functioned properly.
7 8 9 05 R0 76-17	80
7 8 9 06 [80
7 6 9 PRIME COMPONENT SUPPLIER 07 C H E CAUSE CODE COMPONENT CODE COMPONENT SUPPLIER 07 C H E R E L A Y X N 7 8 9 10 11 12 17 43	COMPONENT MANUFACTURER VIOLATION W 1 2 0 N 44 47 48
CAUSE OESCRIPTION OB The BF Relay in question was replaced with a	n new relay which operated properly.
7 8 9 09 The faulty BF Relay that was removed was fou	80 and to have a bad contact which didn't
7 8 9 10 function properly.	B0
7 8 9 FACILITY STATUS $\begin{bmatrix} 0 \\ 9 \\ 9 \\ 9 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 9 \\ 9 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 9 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1 \\ 1 \\ 1 \end{bmatrix}$ $\begin{bmatrix} 0 \\ 1$	
FORM OF ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT DF ACTIVITY	LOCATION OF RELEASE
12 z NA 7 8 9 10 11 44	45 80
PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION 13 0 0 0 Z NA	80
PERSONNEL INJURIES NUMBER DESCRIPTION	
14 ØØØ NA 7 8 9 11 12	j
	· · · · ·
7 8 9 LOSS OR DAMAGE TO FACILITY	80
TYPE DESCRIPTION 16 2 NA 7 8 9 10	80
	1
	. 80
ADDITIONAL FACTORS 18 7 8	80
ияя NAME:	PHONE: 414/432-3311
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LICENSEE EVENT REPORT			
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LICENSEE NAME 01 W IKNP1 00-0 7 8 9 14 15	ENSE NUMBER 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	•	
CATEGORY REPORT REPORT TYPE SOURCE DC DI CON'T P 0 L L L 0 5 0 7 8 57 58 59 60 61	CKET NUMBER EVENT DATE REPORT OAT	e 7 6 80	
EVENT OESCRIPTION O[2] Service water motor operated va 7 8 9 O[3] with control room switch. After 7 8 9 O[4] properly. Three of the four fa 7 8 9 O[5] Technical Specifications. RO 7 7 8 9 O[6] 7 8 9	Ive for containment fan coil unit 1D did not open er resetting the circuit breaker the valve function un coil units remained operable as specified by 76-16	B0 1ed 80 80 80 80 80 80	
SYSTEM CODE CAUSE CODE COMPONENT CODE 07 S B E V A L V O P 7 8 9 10 11 12 12	COMPONENT COMPONENT MANUFACTURER VIOLATION $A \downarrow L 2 0 0 \downarrow N \downarrow$ 7 43 44 47 48		
08 An investigation of the value of 7 8 09 responsible for the circuit bre 7 8 10 value operator functioned properator	perator revealed that a broken torque switch was eaker trip. The torque switch was replaced and the erly.		
FACILITY % POWER OTHER ST 11 E Ø 9 NA 7 8 9 10 12 13	ATUS DISCOVERY DISCOVERY DESCRIPTION		
FORM DF CDNTENT ACTIVITY CDNTENT RELEASE OF RELEASE 12 Z 2 Z 3 NA	LOCATION OF RELEASE		
PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION 13 0 0 0 2 NA 7 8 9 11 12 13		80	
PERSONNEL INJURIES NUMBER DESCRIPTION 14 0 0 0 NA 7 8 9 11 12		j 80	
OFFSITE CONSEQUENCES		80	
TYPE DESCRIPTION 16 Z NA 7 8 9 10		80	
PUBLICITY		. 80	
ADDITIONAL FACTORS			
	SUCNE 414/432-3311	80	
	GP0 /	881 • 667	

D.LANDAM

WISCONSIN PUBLIC SERVICE CORPORATION



P.O. Box 1200, Green Bay, Wisconsin 54305

October 22, 1976

Mr. J. G. Keppler, Regional Director Office of Inspection & Enforcement Region III U. S. Nuclear Regulatory Commission 799 Roosevelt Road Glen Ellyn, IL 60137

Dear Mr. Keppler:

Subject: Docket 50-305 Operating License DPR-43 Reportable Occurrences RO 76-16 and RO 76-17

In accordance with the requirements of Technical Specifications, Section 6.9.2, the attached Licensee Event Reports for Reportable Occurrences RO 76-16 and RO 76-17 are submitted. Both reports are the result of component failures which are considered to be caused by normal wear from usage. Therefore, the corrective action performed is considered complete and no further action is required.

Very truly yours,

E. W. James Senior Vice President Power Supply & Engineering

EWJ:sna Enc. cc - Dir, Office of Inspection & Enforcement US NRC, Washington, D. C. 20555 Dir, Office of Management Info & Program Control US NRC, Washington, D. C. 20555

Υ,	LICENSEE EVENT REPORT	
		ON)
01 7 8	$\begin{array}{c c} Licensee \\ NAME \\ \hline \\ W I K N P 1 \\ 9 \\ 14 \\ 15 \\ \hline \\ 15 \\ \hline \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 $	
01 7 8	CATEGORY REPORT TYPE REPORT SDURCE DOCKET NUMBER EVENT DATE REPORT DATE CON'T P 0 1 0 5 0 9 2 3 7 6 1 0 2 2 7 3 57 58 59 60 61 68 69 74 75	6 80
02	EVENT DESCRIPTION	1
7 8 03	9 with control room switch. After resetting the circuit breaker the valve functioned	80
	properly. Three of the four fan coil units remained operable as specified by	80
្រីខ្នាំ	9 Technical Specifications. RO 76-16	
	9 DDME	
	SYSTEM CAUSE COMPONENT CODE COMPONENT SUPPLIER COMPONENT NANUFACTURER VIOLATION S B E V A L V O P A L 2 Ø Ø N 9 10 11 12 17 43 44 47 48	
08	CAUSE DESCRIPTION An investigation of the valve operator revealed that a broken torque switch was	ł
7 8 09	9 responsible for the circuit breaker trip. The torque switch was replaced and the	80
7 8 10	9 valve operator functioned properly.	80
7 B	9 METHOD OF STATUS % POWER DTHER STATUS METHOD OF E Ø 9 NA A NA 9 10 12 13 44 45 46	80
12 7 8	FORM OF ACTIVITY CONTENT RELEASED DF RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE Z Z NA NA 9 10 11 44 45	
្មាខា្ត		
, U	PERSONNEL INJURIES NUMBER DESCRIPTION	80
14 7 8	9 11 12	80
15	OFFSITE CONSEQUENCES	
78	9 LOSS OR DAMAGE TO FACILITY	80
[नन]		80
	9	80
18	ADDITIONAL FACTORS	1
7 8	9	80
[1]9 7 8	9	80
	NAME: PHONE: PHONE: 414/432-3311 GP0 881-6	

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CONT	ЮL BLOCK:	6	{PLEASE PRINT ALL REQUIREO	INFORMATION)
LICENSEE NAME 7 8 9	P 1 0 0 - 0 0 C 14 15	NUMBER 000-000 25	LICENSE EVENT TYPE TYPE 4 1 1 1 1 1 26 30 31 3	12
01 CON'T P 0 7 8 57 58		шмвея 0 3 0 5 68 69	EVENT DATE REP 9 2 3 7 6 1 0 74 75	ORT DATE 2 2 7 6 80
EVENT DESCRIPT	ION performance of engineere	l safeguards surve	eillance testing, Train	"B"
7 6 9 03 <u>feedwater</u>	isolation actuation signa.	l did not operate.	An investigation reve	80 aled
$\begin{bmatrix} 7 & 8 & 9 \\ 0 & \\ 0 & \\ 1 $	Relay did not function provide	operly. Train "A'	' had functioned properl	80 y.
05 <u>RO 6-17</u> 7 8 9		·		
06 (7 8 9		PRIME] 80
$ \begin{array}{c} \text{SYSTEM} \\ \text{CODE} \\ CODE$		MPONENT COMPONE UPPUER MANUFACTL N W 43 44		
CAUSE DESCRIPT	DN By in question was replace	ed with a new rela	y which operated proper	1y.
7 8 9 09 The faulty	BF Relay that was removed	l was found to hav	ve a bad contact which d	80 idn't
7 8 9 10 function pr	operly.			08
FACILITY STATUS 11 E L 7 8 9 10	* POWER OTHER STATUS		DISCOVERY DESCRIPTION	
FORM OF ACTIVITY CON RELEASED DF RI Z	Z NA		LOCATION DF RELEASE	
	DSURES (PE DESCRIPTION Z NA			
7 8 9 11 1 PERSONNEL INJU	2 13 RIES			80
	NA			
	JENCES			. 1
7 8 9 LDSS OR DAMAG	E TO FACILITY			80
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	· .			80
7 8 9				80
	ORS			
7 89	· .			80
7 8 9 NAME			414/432-3311	80
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