

## NRC DISTRIBUTION FOR PART 50 DOCKET MATERIAL

FILE NUMBER  
INCIDENT REPORT

TO: J.G. KEPPLER

FROM: IOWA ELEC. LIGHT & POWER CO.  
CEDAR RAPIDS, IOWA  
G.G. HUNTDATE OF DOCUMENT  
10-12-76DATE RECEIVED  
10-18-76☒ LETTER  
☐ ORIGINAL  
☐ COPY☐ NOTORIZED  
☒ UNCLASSIFIED

PROP

INPUT FORM

NUMBER OF COPIES RECEIVED

30

## DESCRIPTION

LTR. TRANS THE FOLLOWING.....

PLANT NAME: DUANE ARNOLD

## ENCLOSURE

LICENSEE EVENT REPORT # 76-60, ON 9-28-76  
CONCERNING REDUCED REDUNDANCY IN THE HPCI  
TURBINE STEAM LINE HIGH FLOW INSTRUMENT VALVE...( 30 CARBON SIGNED CYS. RECEIVED )  
( 2 PAGES )**DO NOT REMOVE  
ACKNOWLEDGED**NOTE: IF PERSONNEL EXPOSURE IS INVOLVED  
SEND DIRECTLY TO KREGER/J. COLLINS

## FOR ACTION/INFORMATION

SAB 10-18-76

☒ BRANCH CHIEF: LEAR  
☒ W/3 CYS FOR ACTION  
☒ LIC. ASST.: PARRISH  
☒ W/ CYS  
☒ ACRS 16 CYS ~~XXXXXXXXXX~~ SENT TO LA

## INTERNAL DISTRIBUTION

☒ REG FILE  
☒ NRC PDR  
☒ I & E (2)  
☒ MIPC  
☒ SCHROEDER/IPPOLITO  
☒ HOUSTON  
☒ NOVAK/CHECK  
☒ GRIMES  
☒ CASE  
☒ BUTLER  
☒ HANAUER  
☒ TEDESCO/MACCARY  
☒ EISENHUT  
☒ BAER  
☒ SHAO  
☒ VOLLMER/BUNCH  
☒ KREGER/J. COLLINS

## EXTERNAL DISTRIBUTION

☒ LPDR: CEDAR RAPIDS, IOWA  
☒ TIC:  
☒ NSIC:

## CONTROL NUMBER

10517  
104

Regulatory

# IOWA ELECTRIC LIGHT AND POWER COMPANY

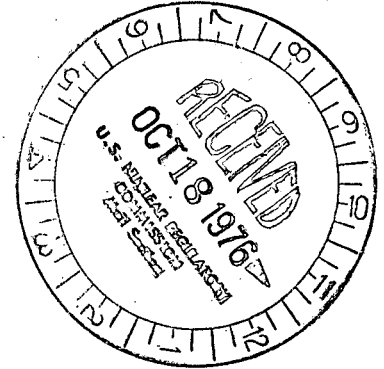
DUANE ARNOLD ENERGY CENTER  
P. O. Box 351  
Cedar Rapids, Iowa 52406  
October 12, 1976  
DAEC -76 - 321



Mr. James G. Keppler, Director  
Office of Inspection and Enforcement  
U. S. Nuclear Regulatory Commission - Region III  
799 Roosevelt Road  
Glen Ellyn, Illinois 60137

Subject: Licensee Event Report No. 76-60  
(30 day)

File: A-118a



Dear Mr. Keppler:

In accordance with Appendix A to Operating License DPR-49, Technical Specifications and Bases for Duane Arnold Energy Center and Regulatory Guide 10.1, please find attached a copy of the subject Licensee Event Report. (Total of 3 copies transmitted)

Very truly yours,

G. G. Hunt  
Chief Engineer  
Duane Arnold Energy Center

Docket 50-331

attachment

GGH/DLW/mg

cc: Director, Office of Inspection and Enforcement (30)  
U. S. Nuclear Regulatory Commission.  
Washington, D.C. 20555

Director, Management Information and Program Control (3)  
U. S. Nuclear Regulatory Commission  
Washington, D.C. 20555

10517

# LICENSEE EVENT REPORT

CONTROL BLOCK: \_\_\_\_\_

[PLEASE PRINT ALL REQUIRED INFORMATION]

LICENSEE NAME														LICENSE NUMBER														LICENSE TYPE				EVENT TYPE						
01	I	A	D	A	C	1	0	0	-	0	0	0	0	0	-	0	0	4	1	1	1	1	0	3														
7	8	9				14	15										25	26				30	31	32														
01		CON'T		CATEGORY		REPORT TYPE		REPORT SOURCE		DOCKET NUMBER						EVENT DATE				REPORT DATE																		
01	7	8				57	58	L	59	L	60							0	5	0	-	0	3	3	1	0	9	2	8	7	6	1	0	1	2	7	6	
7	8	9															61							68	69						74	75						80

**EVENT DESCRIPTION**

02	HPCI turbine steam line high flow instrument PDIS 2245 equalizing valve	80
03	leaks through resulting in reduced redundancy. The valve was disassembl	80
04	ed, cleaned, reassembled, and pressure checked. The pressure check was	80
05	satisfactory. No further problems were encountered. (R0 76-60)	80
06		80

SYSTEM CODE		CAUSE CODE		COMPONENT CODE				PRIME COMPONENT SUPPLIER		COMPONENT MANUFACTURER				VIOLATION	
07	S	F	F	V	A	L	V	E	X	N	D	2	3	2	Y
7	8	9	10	11					17	43				47	48

**CAUSE DESCRIPTION**

08	Inspection of valve seating surfaces did not indicate anything abnormal	80
09	1. The wiping cloth did not show any appreciable dirt. Leakage could ha	80
10	ve been caused by a small piece of foreign material not detected.	80

FACILITY STATUS		% POWER		OTHER STATUS		METHOD OF DISCOVERY		DISCOVERY DESCRIPTION			
11	E	0	9	1	NA	B		Surveillance Testing			
7	8	9	10	11	12	13	44	45	46		80
FORM OF ACTIVITY RELEASED		CONTENT OF RELEASE		AMOUNT OF ACTIVITY				LOCATION OF RELEASE			
12	Z	Z		NA				NA			
7	8	9	10	11			44	45			80

**PERSONNEL EXPOSURES**

NUMBER		TYPE		DESCRIPTION	
13	0	0	0	Z	NA
7	8	9	11	12	13

**PERSONNEL INJURIES**

NUMBER		DESCRIPTION		
14	0	0	0	NA
7	8	9	11	12

**OFFSITE CONSEQUENCES**

15	NA	80
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**LOSS OR DAMAGE TO FACILITY**

TYPE		DESCRIPTION	
16	Z	NA	
7	8	9	10

**PUBLICITY**

17	NA	80
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**ADDITIONAL FACTORS**

18		80
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19		80
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NAME: M. Schwartz

PHONE: 319-851-5611