

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. Hunt

DATE OF DOCUMENT
4-9-76

DATE RECEIVED
4-15-76

LETTER
 ORIGINAL
 COPY

NOTORIZED
 UNCLASSIFIED

PROP

INPUT FORM

NUMBER OF COPIES RECEIVED
30

DESCRIPTION

Ltr. trans the following.....

ENCLOSURE

LER # 76-18, On 3-14476 Concerning the SRM
found reading low.....

(30 Cys. Received - No Original)

DO NOT REMOVE
ACKNOWLEDGED

PLANT NAME: Duane Arnold

NOTE: IF PERSONNEL EXPOSURE IS INVOLVED
SEND DIRECTLY TO KREGER/J. COLLINS

SAFETY

FOR ACTION/INFORMATION

ENVIRO

SAB 4-19-76

BRANCH CHIEF:

Lear

W/3 CYS FOR ACTION

LIC. ASST:

Parrish

W/ CYS

ACRS 16 CYS ~~HOUSTON~~/SENT TO LA

INTERNAL DISTRIBUTION

REG FILE

NRC PDR

I & E (2)

MIPC (3)

SCHROEDER/IPPOLITO

HOUSTON

NOVAK/CHECK

GRIMES/SCHWENCER

CASE

F. WILLIAMS

HANAUER

TEDESCO/MACCARY

EISENHUT

BAER

SHAO

VOLLMER/BUNCH

KREGER/J. COLLINS

EXTERNAL DISTRIBUTION

CONTROL NUMBER

LPDR: Cedar Rapids, Iowa

TIC

NSIC

Q

3830

IOWA ELECTRIC LIGHT AND POWER COMPANY

DUANE ARNOLD ENERGY CENTER

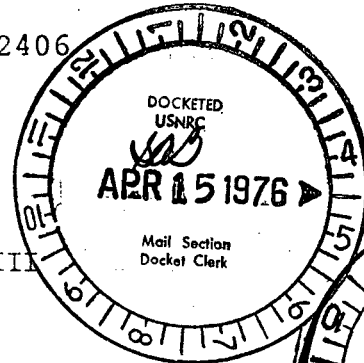
P. O. Box 351

Cedar Rapids, Iowa 52406

DAEC - 76 - 98

April 9, 1976

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.76-18
(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,

A handwritten signature in cursive script, appearing to read "G. G. Hunt".

G. G. Hunt
Chief Engineer
Duane Arnold Energy Center

Docket 50-331

attachment

DLW/GGH/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

LICENSEE EVENT REPORT

CONTROL BLOCK:

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

(PLEASE PRINT ALL REQUIRED INFORMATION)

LICENSEE NAME:

| | | | | | | |
|----|---|---|---|---|---|---|
| 01 | I | A | D | A | C | 1 |
|----|---|---|---|---|---|---|

 LICENSE NUMBER:

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|---|

 LICENSE TYPE:

| | | | | |
|---|---|---|---|---|
| 4 | 1 | 1 | 1 | 1 |
|---|---|---|---|---|

 EVENT TYPE:

| | |
|---|---|
| 0 | 3 |
|---|---|

CATEGORY:

| | |
|----|------|
| 01 | CONT |
|----|------|

 REPORT TYPE:

| |
|---|
| L |
|---|

 REPORT SOURCE:

| |
|---|
| L |
|---|

 DOCKET NUMBER:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 0 | 5 | 0 | - | 0 | 3 | 3 | 1 |
|---|---|---|---|---|---|---|---|

 EVENT DATE:

| | | | | | |
|---|---|---|---|---|---|
| 0 | 3 | 1 | 4 | 7 | 6 |
|---|---|---|---|---|---|

 REPORT DATE:

| | | | | | |
|---|---|---|---|---|---|
| 0 | 4 | 0 | 9 | 7 | 6 |
|---|---|---|---|---|---|

EVENT DESCRIPTION

| |
|----|
| 02 |
|----|

 During SRM trip functional testing, SRM A (4573A) was found to be read-

| |
|----|
| 03 |
|----|

 ing approximately 50 percent low. The other three SRM channels were

| |
|----|
| 04 |
|----|

 operable. Plus 20 volt voltage preregulator replaced.

| |
|----|
| 05 |
|----|

 Manufacturer - General Electric, type 194X386G001 (RO 76-18)

| |
|----|
| 06 |
|----|

SYSTEM CODE:

| | |
|---|---|
| I | D |
|---|---|

 CAUSE CODE:

| |
|---|
| E |
|---|

 COMPONENT CODE:

| | | | | | |
|---|---|---|---|---|---|
| I | N | S | T | R | U |
|---|---|---|---|---|---|

 PRIME COMPONENT SUPPLIER:

| |
|---|
| N |
|---|

 COMPONENT MANUFACTURER:

| | | | |
|---|---|---|---|
| G | O | 8 | 0 |
|---|---|---|---|

 VIOLATION:

| |
|---|
| Y |
|---|

CAUSE DESCRIPTION

| |
|----|
| 08 |
|----|

 Faulty diode in voltage preregulator.

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|----|
| 09 |
|----|

| |
|----|
| 10 |
|----|

FACILITY STATUS:

| |
|---|
| H |
|---|

 % POWER:

| | | |
|---|---|---|
| 0 | 0 | 0 |
|---|---|---|

 OTHER STATUS:

| |
|----|
| NA |
|----|

 METHOD OF DISCOVERY:

| |
|---|
| B |
|---|

 DISCOVERY DESCRIPTION:

| |
|----------------------|
| Surveillance Testing |
|----------------------|

FORM OF ACTIVITY RELEASED:

| |
|---|
| Z |
|---|

 CONTENT OF RELEASE:

| |
|---|
| Z |
|---|

 AMOUNT OF ACTIVITY:

| |
|----|
| NA |
|----|

 LOCATION OF RELEASE:

| |
|----|
| NA |
|----|

PERSONNEL EXPOSURES

NUMBER:

| | | |
|---|---|---|
| 0 | 0 | 0 |
|---|---|---|

 TYPE:

| |
|---|
| Z |
|---|

 DESCRIPTION:

| |
|----|
| NA |
|----|

PERSONNEL INJURIES

NUMBER:

| | | |
|---|---|---|
| 0 | 0 | 0 |
|---|---|---|

 DESCRIPTION:

| |
|----|
| NA |
|----|

OFFSITE CONSEQUENCES

| |
|----|
| 15 |
|----|

| |
|----|
| NA |
|----|

LOSS OR DAMAGE TO FACILITY

TYPE:

| |
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| |
|--|

 DESCRIPTION:

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|----|
| NA |
|----|

PUBLICITY

| |
|----|
| 17 |
|----|

| |
|----|
| NA |
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ADDITIONAL FACTORS

| |
|----|
| 18 |
|----|

| |
|----|
| NA |
|----|

| |
|----|
| 19 |
|----|

NAME: D. Wilson PHONE: 319-851-5611