

50-331

NRC DISTRIBUTION FOR PART 50 DOCKET MATERIAL

FILE NUMBER
INCIDENT REPORT

TO: J.G. KEPPLER

FROM: IOWA ELEC LIGHT & POWER CO.
CEDAR RAPIDS, IOWA
E.L. HAMMOND

DATE OF DOCUMENT
5/3/77

DATE RECEIVED
5/23/77

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 UNCLASSIFIED

PROP

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100

DESCRIPTION

LTR. TRANS THE FOLLOWING.....

(1P)

PLANT NAME: DUANE ARNOLD
SAB

ENCLOSURE

LICENSEE EVENT REPORT # 77-31, ON 4/8/77
CONCERNING THE 1A4 BUS UNDERVOLTAGE RELAY, 127-
4, DEENERGIZED AT 19.7 VAC.....

(1P)

DO NOT REMOVE

ACKNOWLEDGED

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

FOR ACTION/INFORMATION

BRANCH CHIEF: *LEARN*
W/3 CYS FOR ACTION
LIC. ASST.: *PARLISH*
W/1 CYS
ACRS *16* CYS HOLDING/SENT *AS CAT B*

INTERNAL DISTRIBUTION

REG FILE
 NRC PDR
I & E (2)
MIPC
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HANAUER
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EISENHUT
BAER
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VOLLMER/BUNCH
KREGER/J. COLLINS

EXTERNAL DISTRIBUTION

LPDR: *CEDAR RAPIDS 1A.*
TIC:
NSIC:

CONTROL NUMBER

771440137

AO 4

60

D. Landon

IOWA ELECTRIC LIGHT AND POWER COMPANY

DUANE ARNOLD ENERGY CENTER
P. O. Box 351
Cedar Rapids, Iowa 52406
May 3, 1977
DAEC-77-249



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. 77-31
(30 day)

File: A-118a

Regulatory Docket File

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,

EL Hammond /lh

Ellery L. Hammond
Chief Engineer
Duane Arnold Energy Center

ELH/JVS/mg

Docket 50-331
attachment

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

771440137

MAY 6 1977

LICENSEE EVENT REPORT

CONTROL BLOCK:

(PLEASE PRINT ALL REQUIRED INFORMATION)

LICENSEE NAME:

LICENSE NUMBER:

LICENSE TYPE:

EVENT TYPE:

REPORT TYPE:

REPORT SOURCE:

DOCKET NUMBER:

EVENT DATE:

REPORT DATE:

EVENT DESCRIPTION

SYSTEM CODE:

CAUSE CODE:

COMPONENT CODE:

PRIME COMPONENT SUPPLIER:

COMPONENT MANUFACTURER:

VIOLATION:

CAUSE DESCRIPTION

FACILITY STATUS:

% POWER:

OTHER STATUS:

METHOD OF DISCOVERY:

DISCOVERY DESCRIPTION:

FORM OF ACTIVITY RELEASED:

CONTENT OF RELEASE:

AMOUNT OF ACTIVITY:

LOCATION OF RELEASE:

PERSONNEL EXPOSURES

NUMBER:

TYPE:

DESCRIPTION:

PERSONNEL INJURIES

NUMBER:

DESCRIPTION:

OFFSITE CONSEQUENCES

LOSS OR DAMAGE TO FACILITY

TYPE:

DESCRIPTION:

PUBLICITY

ADDITIONAL FACTORS

NAME: J. Van Sickel PHONE: 319-851-5611

RECEIVED DOCUMENT
PROCESSING UNIT

1971 MAY 20 PM 1 56