



Omaha Public Power District
444 South 16th Street Mall
Omaha, NE 68102-2247

LIC-13-0027
March 19, 2013

U.S. Nuclear Regulatory Commission
Attn: Document Control Desk
Washington, DC 20555-0001

Reference: Docket No. 50-285

Subject: Licensee Event Report 2013-001, Revision 0, for the Fort Calhoun Station

Please find attached Licensee Event Report 2012-001, Revision 0, dated March 19, 2013. This report is being submitted pursuant to 50.73(a)(2)(ii)(B). There are no new commitments being made in this letter.

If you should have any questions, please contact Terrence W. Simpkin, Manager, Site Regulatory Assurance, at (402) 533-6263.

Sincerely,

Louis P. Cortopassi,
Site Vice President and CNO

LPC/epm/rjr

Attachment

- c: E. E. Collins, Jr., NRC Regional Administrator, Region IV
- L. E. Wilkins, NRC Project Manager
- J. M. Sebrosky, NRC Project Manager
- J. C. Kirkland, NRC Senior Resident Inspector

LICENSEE EVENT REPORT (LER)(See reverse for required number of
digits/characters for each block)

Estimated burden per response to comply with this mandatory collection request: 80 hours. Reported lessons learned are incorporated into the licensing process and fed back to industry. Send comments regarding burden estimate to the FOIA/Privacy Section (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 205 55-0001, or by internet e-mail to infocollects.resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0104), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

1. FACILITY NAME

Fort Calhoun Station

2. DOCKET NUMBER

05000285

3. PAGE

1 OF 3

4. TITLE

Mounting of GE HFA Relays does not Meet Seismic Requirements

5. EVENT DATE			6. LER NUMBER			7. REPORT DATE			8. OTHER FACILITIES INVOLVED	
MONTH	DAY	YEAR	YEAR	SEQUENTIAL NUMBER	REV NO.	MONTH	DAY	YEAR	FACILITY NAME	DOCKET NUMBER
12	21	2012	2013	001 - 0		03	19	2013	FACILITY NAME	DOCKET NUMBER 05000
									FACILITY NAME	DOCKET NUMBER 05000

9. OPERATING MODE

5

11. THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR §: (Check all that apply)

<input type="checkbox"/> 20.2201(b)	<input type="checkbox"/> 20.2203(a)(3)(i)	<input type="checkbox"/> 50.73(a)(2)(i)(C)	<input type="checkbox"/> 50.73(a)(2)(vii)
<input type="checkbox"/> 20.2201(d)	<input type="checkbox"/> 20.2203(a)(3)(ii)	<input type="checkbox"/> 50.73(a)(2)(ii)(A)	<input type="checkbox"/> 50.73(a)(2)(viii)(A)
<input type="checkbox"/> 20.2203(a)(1)	<input type="checkbox"/> 20.2203(a)(4)	<input checked="" type="checkbox"/> 50.73(a)(2)(ii)(B)	<input type="checkbox"/> 50.73(a)(2)(viii)(B)
<input type="checkbox"/> 20.2203(a)(2)(i)	<input type="checkbox"/> 50.36(c)(1)(i)(A)	<input type="checkbox"/> 50.73(a)(2)(iii)	<input type="checkbox"/> 50.73(a)(2)(ix)(A)
<input type="checkbox"/> 20.2203(a)(2)(ii)	<input type="checkbox"/> 50.36(c)(1)(ii)(A)	<input type="checkbox"/> 50.73(a)(2)(iv)(A)	<input type="checkbox"/> 50.73(a)(2)(x)
<input type="checkbox"/> 20.2203(a)(2)(iii)	<input type="checkbox"/> 50.36(c)(2)	<input type="checkbox"/> 50.73(a)(2)(v)(A)	<input type="checkbox"/> 73.71(a)(4)
<input type="checkbox"/> 20.2203(a)(2)(iv)	<input type="checkbox"/> 50.46(a)(3)(ii)	<input type="checkbox"/> 50.73(a)(2)(v)(B)	<input type="checkbox"/> 73.71(a)(5)
<input type="checkbox"/> 20.2203(a)(2)(v)	<input type="checkbox"/> 50.73(a)(2)(i)(A)	<input type="checkbox"/> 50.73(a)(2)(v)(C)	<input type="checkbox"/> OTHER
<input type="checkbox"/> 20.2203(a)(2)(vi)	<input type="checkbox"/> 50.73(a)(2)(i)(B)	<input type="checkbox"/> 50.73(a)(2)(v)(D)	Specify in Abstract below or in NRC Form 366A

10. POWER LEVEL

0

12. LICENSEE CONTACT FOR THIS LER

FACILITY NAME

Erick Matzke

TELEPHONE NUMBER (Include Area Code)

402-533-6855

13. COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT

CAUSE	SYSTEM	COMPONENT	MANU-FACTURER	REPORTABLE TO EPIX	CAUSE	SYSTEM	COMPONENT	MANU-FACTURER	REPORTABLE TO EPIX

14. SUPPLEMENTAL REPORT EXPECTED☒ YES (If yes, complete 15. EXPECTED SUBMISSION DATE)☐ NO**15. EXPECTED SUBMISSION DATE**

MONTH	DAY	YEAR
6	28	2013

ABSTRACT (Limit to 1400 spaces, i.e., approximately 15 single-spaced typewritten lines)

On January 15, 2013, while reviewing a previous condition report, it was identified that a previous operability determination (OD) completed for General Electric (GE) model HFA relays was incorrect in that it did not appear to fully address the condition of the mounting screws that required torqueing. The seismic test results stated that the GE HFA relays passed the seismic testing, but the relays required two screws to be torqued to 5 foot-pounds. This condition of the additional required torqueing was initially entered into the corrective action program on December 21, 2012.

Currently, approximately 136 relays, that provide various indication and control functions in systems such as high pressure safety injection, charging, containment ventilation, and the emergency diesel generator, have been identified as potentially affected. Relay replacement/torqueing is in progress. A cause analysis is in progress, the results of which will be published in a supplement to this LER.

**LICENSEE EVENT REPORT (LER)
CONTINUATION SHEET**

1. FACILITY NAME	2. DOCKET	6. LER NUMBER			3. PAGE
Fort Calhoun Station	05000285	YEAR	SEQUENTIAL NUMBER	REV NO.	2 OF 3
		2013	- 001	- 0	

NARRATIVE

BACKGROUND

Fort Calhoun Station (FCS) is a two-loop reactor coolant system of Combustion Engineering (CE) design.

EVENT DESCRIPTION

On January 15, 2013, while reviewing a previous condition report, it was identified that a previous operability determination (OD) completed for General Electric (GE) model HFA relays was incorrect in that it did not appear to fully address the condition of the mounting screws that required torqueing. The seismic test results stated that the GE HFA relays passed the seismic testing, but the relays required two screws to be torqued to 5 foot-pounds. This condition of additional required torqueing was initially entered into the corrective action program on December 21, 2012.

Extent of condition reviews estimate approximately 136 relays, that provide various indication and control functions in systems such as high pressure safety injection, charging, containment ventilation, and the emergency diesel generator, are potentially affected. A cause analysis is in progress, the results of which will be published in a supplement to this LER.

At approximately 2355 Central Standard Time (CST) on February 27, 2013, an 8-hour notification was made to the Headquarters Operations office (HOO), under 10CFR50.72(b)(3)(ii)(B), unanalyzed condition, reporting this event. During the notification, the event date identified was incorrectly stated as February 26, 2013. This is the date that the initial operability determination was called into question. The correct event date is December 21, 2012. This is the date which OPPD acknowledged that the vendor identified the GE HFAs relays did pass the seismic testing, but the relays required two screws to be torqued to 5 foot-pounds to pass the testing.

This report is being submitted in accordance with 50.73(a)(2)(ii)(B): any event or condition that resulted in the nuclear power plant being in an unanalyzed condition that significantly degraded plant safety. If additional reporting criteria are identified during the causal analysis, the results will be published in a supplement to this LER.

CONCLUSION

A causal analysis is in progress. The results of the analysis will be published in a supplement to this LER.

CORRECTIVE ACTIONS

Replacement/torqueing of the affected relays is underway. A causal analysis is in progress. The results of the analysis will be published in a supplement to this LER.

SAFETY SIGNIFICANCE

A causal analysis is in progress. The results of the analysis will be published in a supplement to this LER.

SAFETY SYSTEM FUNCTIONAL FAILURE

A causal analysis is in progress. The results of the analysis will be published in a supplement to this LER.

U.S. NUCLEAR REGULATORY COMMISSION

**LICENSEE EVENT REPORT (LER)
CONTINUATION SHEET**

1. FACILITY NAME	2. DOCKET	6. LER NUMBER			3. PAGE
Fort Calhoun Station	05000285	YEAR	SEQUENTIAL NUMBER	REV NO.	3 OF 3
		2013	- 001 -	0	

NARRATIVE

PREVIOUS EVENTS

A causal analysis is in progress. The results of the analysis will be published in a supplement to this LER.