

RO Job Performance Measure "A"

Facility: **Vogtle**

Task No: V-LO-TA-63005

Task Title: **Perform AFD Monitoring**

JPM No: V-NRC-JP-14915-HL17

K/A: G2.1.37 RO 4.3 SRO 4.6

Examinee: _____ NRC Examiner: _____

Facility Evaluator: _____ Date: _____

Method of testing:

Simulated Performance _____ Actual Performance _____

Classroom _____ Simulator _____ Plant _____

Read to the examinee:

I will explain the initial conditions, which steps to simulate or discuss, and provide initiating cues. When you complete the task successfully, the objective for this job performance measure will be satisfied.

Initial Conditions: Unit 1 has recently recovered from a load rejection. The unit is at 70% power. Annunciator ALB10-F06 is lit.

I&C has reported that the AFD monitor alarm ALB10-F06 is inoperable.

Initiating Cue: The SS directs you to perform 14915-1 for AFD Monitoring, including Data Sheet 6 and completing section 7.0, Evaluation and Review, for all the following provided data.

Time	NI Channel	Reading	ΔFlux Channel	Reading
0700	1NI-41B	70%	1-N-41C	-15%
0700	1NI-42B	68%	1-N-42C	-22%
0700	1NI-43B	70%	1-N-43C	-25%
0700	1NI-44B	70%	1-N-44C	-15%
0800	1NI-41B	70%	1-N-41C	-17%
0800	1NI-42B	69%	1-N-42C	-21%
0800	1NI-43B	70%	1-N-43C	-23%
0800	1NI-44B	69%	1-N-44C	-17%
0900	1NI-41B	70%	1-N-41C	-18%
0900	1NI-42B	69%	1-N-42C	-20%
0900	1NI-43B	70%	1-N-43C	-22%
0900	1NI-44B	70%	1-N-44C	-18%

Task Standard: AFD monitoring per 14915-1 Data Sheet 6 performed correctly.

Required Materials: 14915-1, Data Sheet 6
Unit 1 Plant Technical Data Book Tab 6.0
Calculator
Red Ink Pen

This JPM is a reuse from Exam 2011-301. The JPM number was V-NRC-JP-19105-004.

Time Critical Task: No

Validation Time: 15 minutes

Performance Information

Critical steps denoted with an asterisk

***Step 1 Determine upper and lower limits of AFD from PTDB-1 Tab 6.0.**

Standard: Candidate fills in date and power level 70% and records the value of the doghouse limit at 70%. Upper limit +19.5% ± 0.5% (calculated value is 19.6%) Lower limit -24% ± 0.5%.

Comment:

Step 2 Record indicated Axial Flux Difference for each operable Excore Channel.

Standard: Candidate records Delta Flux values for all channels.

Comment:

***Step 3 Verify the Axial Flux Difference is within limits of PTDB-1 Tab 6.0.**

Standard: Candidate verifies that three are within limits and initials or signs Verified block to complete the surveillance satisfactory.

Comment:

Step 4 With the indicated AFD outside of the above required limits on 2 or more channels and with THERMAL POWER greater than or equal to 50% of RATED THERMAL POWER, **reduce** THERMAL POWER to less than 50% of RATED THERMAL POWER within 30 minutes.

Per Precautions and Limitations, Step 3.0, 1-NI-43C will be Red Circled as being out of tolerance.

Standard: This step does not apply.

Comment:

DATA SHEET 6 (ANSWER KEY)

DATA SHEET 6
Sheet 2 of 4

**AXIAL FLUX DIFFERENCE
WITH
AFD MONITOR ALARM INOPERABLE**

Date Today's date Power 70%

Upper Limit = +19.5% ± 0.5% (from PTDB Tab 6.0)

Lower Limit = -24% ± 0.5%

TIME	1-NI-41C	1-NI-42C	1-NI-43C	1-NI-44C	VERIFIED
0700	<u>-15%</u>	<u>-22%</u>	<u>-25%</u>	<u>-15%</u>	<u>Initials</u>
0800	<u>-17%</u>	<u>-21%</u>	<u>-23%</u>	<u>-17%</u>	<u>Initials</u>
0900	<u>-18%</u>	<u>-20%</u>	<u>-22%</u>	<u>-18%</u>	<u>Initials</u>

ACCEPTANCE CRITERIA (ANSWER KEY)

7.0 EVALUATION AND REVIEW

7.1 TEST PURPOSE

Special Condition(s):

AFD Monitor Inoperable

Data Sheet(s) completed (Circle Appropriate Sheets):

1 2 3 4a 4b 5 6 7 8 9 10 11 12 13 14 15 16 17
18

7.2 Results obtained through the performance of this procedure meet the ACCEPTANCE CRITERIA of Section 6.0.

YES NO

7.3 IF no was checked, immediately **notify** the SS and **initiate** action in accordance with the actions specified on the data sheet(s) not meeting the acceptance criteria.

7.4 Comments (include any abnormal conditions and corrective actions taken):

None

Test Completed and SS Notified: _____

Supervisory Review: _____
Signature Date Time

Terminating cue: Student returns initiating cue sheet.

Verification of Completion

Job Performance Measure No: V-NRC-JP-14915-HL17

Examinee's Name:

Examiner's Name:

Date Performed:

Number of Attempts:

Time to Complete:

Question Documentation:

Question: _____

Response: _____

Result: Satisfactory/Unsatisfactory

Examiner's signature and date: _____

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