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June 8, 2017 GO2-17-121

10 CFR 50.73

U.S. Nuclear Regulatory Commission ATTN: Document Control Desk Washington, D.C. 20555-0001

Subject: COLUMBIA GENERATING STATION, DOCKET NO. 50-397 LICENSEE EVENT REPORT NO. 2016-004-01

Dear Sir or Madam:

Transmitted herewith is Licensee Event Report No. 2016-004-01 for Columbia Generating Station, a supplement to the LER submitted on February 15, 2017. This report is submitted pursuant to 10 CFR 50.73(a)(2)(iv)(A).

There are no commitments being made to the NRC by this letter. If you have any questions or require additional information, please contact Ms. D.M. Wolfgramm, Regulatory Compliance Supervisor, at (509) 377-4792.

Executed on Tures, 2017

Respectfully,

W. G. Hettel Vice President, Operations

Enclosure: Licensee Event Report 2016-004-01

cc: NRC Region IV Administrator NRC NRR Project Manager NRC Senior Resident Inspector/988C CD Sonoda – BPA/1399 WA Horin – Winston & Strawn

| NRC FO   | RM 36   | 66          | U.S. NUCLEAR REGULATORY COMMISSION |           |              |            |  |   | APPROVED BY OMB: NO. 3150-0104 EXPIRES: 10/31/2018 |                       |               |   |                       |                                       |                 |                     |  |  |  |
|--|---------|-------------|------------------------------------|-----------|--------------|------------|--|---|--|-----------------------|---------------|---|-----------------------|---------------------------------------|-----------------|---------------------|--|--|--|
| (06-2016)  |         |             |                                    |           |              |            |  | Estimated burden per response to comply with this mandatory collection request: 80 hours.<br>Reported lessons learned are incorporated into the licensing process and fed back to industry. |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
|  |         |             |                                    |           |              |            | Send comments regarding burden estimate to the FOIA, Privacy and Information Collections<br>Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail<br>to Infocollects Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory                             |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| (See Page 2 for required number of digits/characters for each block)   |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| ″.≉ <sub>966</sub> ≉*  |         |             |                                    |           |              |            | Affairs, NEOB-10202, (3150-0104), Office of Management and Budget, Washington, DC 20503. If a<br>means used to impose an information collection does not display a currently valid OMB control<br>number, the NRC may not conduct or sponsor, and a person is not required to respond to, the<br>information collection. |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| (See NUREG-1022, R.3 for instruction and guidance for completing this form<br><u>http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1022/r3/</u> )   |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
|  |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| 1. FACILITY NAME   |         |             |                                    |           |              |            | 2. DOCKET NUMBER 3   |   |  |                       |               | 3. PAGE                                 |                       |                                       |                 |                     |  |  |  |
| Columbia Generating Station  |         |             |                                    |           |              |            |  |   |  | <b>05000</b> 397      |               |   |                       | 1 <b>OF</b> 3                         |                 |                     |  |  |  |
| 4. TITLE   |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| Automatic Scram Due to Off-site Load Reject  |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| 5. 8   | EVENT   | DATE        | 6. LER NUMBER 7. REF               |           |              |            |  | EPORT   | F DATE 8. OTH                                      |                       |               |   | R FACILITIES INVOLVED |                                       |                 |                     |  |  |  |
| MONTH  | DAY     | YEAR        |                                    |           |              | REV<br>NO. | MONTH  | DAY   | YEAR   | F/                    | FACILITY NAME |   |                       |                                       | DOCKET NUMBER   |                     |  |  |  |
| 10   | 10      | 2016        | 2016 - 004 - 01                    |           |              | 01         | 06   | 08  | 2017   | F/                    | FACILITY NAME |   |                       |                                       | DOCK            | DOCKET NUMBER       |  |  |  |
| 12   | 18      | 2016        | 2016                               |           |              | 01         | 06   |   | 2017   |                       |               |   |                       | 05000                                 |                 |                     |  |  |  |
| 9. OPERATING MODE 11. THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR §: (Check all the second sec |         |             |                                    |           |              |            |  |   |  | ll that a             | pply)         |   |                       |                                       |                 |                     |  |  |  |
|  |         |             | 20.2201(b)                         |           |              |            | 20.2   | 203(a)(3  | )(i)   | [                     | 50.73(a)      | 2)(ii)(A)                               |                       | 50.73                                 | (a)(2)(viii)(A) |                     |  |  |  |
|  | 1       |             | 20.2201(d)                         |           |              |            | 20.2   | )(ii)   | 50.73(a)(2)(ii)(B)                                 |                       |               |   | 50.73(a)(2)(viii)(B)  |                                       |                 |                     |  |  |  |
|  | 1       |             | 20.2203(a)(1)                      |           |              |            | 20.2   | )   | 50.73(a)(2)(iii)                                   |                       |               | 50.73(a)(2)(ix)(A)                      |                       |                                       |                 |                     |  |  |  |
|  |         |             | 20.2203(a)(2)(i)                   |           |              |            | 50.3   | (A)   | √ 50.73(a)(2)(iv)(A)                               |                       |               |   | 50.73(a)(2)(x)        |                                       |                 |                     |  |  |  |
| 10. POWER LEVEL  |         |             | 20.2203(a)(2)(ii)                  |           |              | 50.3       | )(A)   | [   | 50.73(a)(2)(v)(A)                                  |                       |               | 73.71(a)(4)                             |                       |                                       |                 |                     |  |  |  |
| 100  |         |             | 20.2203(a)(2)(iii)                 |           |              |            | 50.36(c)(2)  |   |  | 50.73(a)(2)(v)(B)     |               |   | Τ                     | 73.71(a)(5)                           |                 |                     |  |  |  |
|  |         |             | 20.2203(a)(2)(iv)                  |           |              |            | 50.46(a)(3)(ii)  |   |  | 50.73(a)(2)(v)(C)     |               |   |                       | 73.77(a)(1)                           |                 |                     |  |  |  |
|  |         |             | 20.2203(a)(2)(v)                   |           |              |            | 50.73(a)(2)(i)   |   |  | (A) 50.73(a)(2)(v)(D) |               |   | 73.77(a)(2)(i)        |                                       |                 |                     |  |  |  |
|  |         |             | <br>20.2203(a)(2)(vi)              |           |              |            | 50.73(a)(2)(i)   |   |  | (B) 50.73(a)(2)(vii)  |               |   | 73.77(a)(2)(ii)       |                                       |                 |                     |  |  |  |
|  |         |             |                                    |           |              |            | 50.7   | )(C)  |  |                       | Specify in    | y in Abstract below or in NRC Form 366A |                       |                                       |                 |                     |  |  |  |
|  |         |             | 1000000000                         | 1. Barris |              | 12 110     |  |   | T FOR TI   | HISI                  | FR            |   |                       |                                       |                 |                     |  |  |  |
| LICENSEE   | CONTA   | ст          |                                    |           |              |            |  |   |  |                       |               |   | TELE                  | PHONE NUMBE                           | R (Include      | e Area Code)        |  |  |  |
| Desiree I  | M. Wo   | olfgramm    |                                    |           |              |            |  |   |  |                       |               |   |                       | (509) 3                               | 77-479          | 2                   |  |  |  |
|  |         |             | 13. COMPL                          | ETE ON    | IE LIN       |            |  |   | NT FAILU   | JRE C                 | DESCRIBED     | IN THIS R                               | EPOI                  | · · · · · · · · · · · · · · · · · · · |                 |                     |  |  |  |
| CAUS   | E       | SYSTEM      | COMPON                             | IENT      | MAN<br>FACTU |            | REPORTAB<br>TO EPIX  | LE  | CAUSE  |                       | SYSTEM        | COMPONE                                 | ENT                   | MANU-<br>FACTURER                     |                 | PORTABLE<br>TO EPIX |  |  |  |
|  |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| 14 SUD   |         |             |                                    |           |              |            |  |   |  |                       | 15 EX         | PECTED                                  |                       | MONTH                                 | DAY             | YEAR                |  |  |  |
| 14. SUPPLEMENTAL REPORT EXPECTED   YES (If yes, complete 15. EXPECTED SUBMISSION DATE)   Image: Complete 15. EXPECTED SUBMISSION DATE  |         |             |                                    |           |              |            | SUBMISSION   |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| ABSTRACT (Limit to 1400 spaces, i.e., approximately 15 single-spaced typewritten lines)  |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| On December 18, 2016 at 11:24 hours, an automatic scram occurred due to a fault on an off-site transmission network. A reactor scram   |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| was automatically initiated by the plant response to the transient.  |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| All rods   | s fully | inserted, N | /lain Stean                        | n Isolati | on Va        | alves [S   | B,V] au  | tomatica  | ally close   | ed du                 | ue to loss of | power to                                | both                  | n Reactor P                           | rotecti         | on                  |  |  |  |
| System   | [JC]    | busses. Al  | safety sys                         | stems op  | berate       | d as des   | signed.  | Two Saf   | fety Relie   | ef Va                 | alves [SB,V   | ] were ini                              | itiall                | y cycled au                           | tomati          | cally,              |  |  |  |
| then several manually to maintain Reactor Pressure Vessel [AC] pressure. Reactor water level was maintained with Reactor Core Isolation Cooling [BN], Control Rod Drive [AA] flow, and High Pressure Core Spray [BG].  |         |             |                                    |           |              |            |  |   |  |                       |               |   |                       |                                       |                 |                     |  |  |  |
| 150181101  | II U00  | und [piv],  | Control R                          |           | εĮΑΡ         | i now,     | anu rig  | II FICSSI   |  | Shis                  | ay [DO].      |   |                       |                                       |                 |                     |  |  |  |

The entity responsible for the off-site transmission network, Bonneville Power Administration (BPA), performed a cause evaluation for the loss of off-site power. The cause evaluation stated the event was caused by three sequential 500-kV breaker failures. BPA took immediate corrective actions to restore the off-site transmission network. The root cause evaluation addressing the plant response was performed by plant personnel.

| NRC FORM 366A U.S. NUCLEAR REGULA  | APPROVED BY OMB: NO. 3150-0104 EXPIRES: 10/31/2018 |   |                       |                  |     |                      |     |                  |  |  |  |
|--|--|---|-----------------------|------------------|-----|----------------------|-----|------------------|--|--|--|
| (06-2016)<br>LICENSEE EVENT REP<br>CONTINUATION S<br>(See NUREG-1022, R.3 for instruction and guidance for<br>http://www.nrc.gov/reading-rm/doc-collections/nureg  | SHEET  | 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 and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by 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   |  | 2. DOCK   | KET NUMBER            |                  | 2   |                      |     |                  |  |  |  |
| Columbia Generating Station  | 05000-   |   | 397                   | <b>YEAR</b> 2016 | -   | SEQUENTIAL<br>NUMBER | -[  | REV<br>NO.<br>01 |  |  |  |
| NARRATIVE  |  |   |                       |                  |     |                      |     |                  |  |  |  |
| Plant Conditions<br>The plant was operating at 100% power prior to the event. There were no safety related systems out of service prior to<br>the event.   |  |   |                       |                  |     |                      |     |                  |  |  |  |
| Event Description<br>On December 18, 2016 at 11:24 hours, an automatic scram occurred due to a fault on an off-site transmission network. A<br>reactor scram was automatically initiated by the plant response to the transient.   |  |   |                       |                  |     |                      |     |                  |  |  |  |
| All rods fully inserted and Main Steam Isolation Valves [SB,V] automatically closed due to loss of power to both Reactor<br>Protection System (RPS) [JC] busses that occurred during the transient following the scram. All safety systems operated<br>as designed. A full safety system isolation occurred due to the loss of RPS, which isolated Reactor Closed Cooling [CC]<br>flow from containment. This caused Primary Containment (PC) temperature and pressure to increase causing high PC<br>pressure actuations to occur. Two Safety Relief Valves [SB,V] were initially cycled automatically, then several manually to<br>maintain Reactor Pressure Vessel (RPV) [AC] pressure. Reactor water level was restored with Reactor Core Isolation<br>Cooling (RCIC) [BN], Control Rod Drive [AA] flow, and High Pressure Core Spray (HPCS) [BG]. |  |   |                       |                  |     |                      |     |                  |  |  |  |
| After the initial successful start and injection of RCIC, a plant operator failed to establish the proper line up for re-initiation.<br>This resulted in a trip of RCIC and using HPCS to maintain RPV level.  |  |   |                       |                  |     |                      |     |                  |  |  |  |
| Per plant procedures after the scram an operator tripped the main turbine (MT) [TA], but failed to trip the main generator (MG) [TB]. This allowed voltage to degrade until power was automatically transferred to the backup power sources. The PC was vented through a Standby Gas Treatment Filter [BH] per plant procedures to lower PC pressure.  |  |   |                       |                  |     |                      |     |                  |  |  |  |
| Cause<br>Bonneville Power Administration (BPA) (operator of the off-site transmission network) performed an evaluation of the off-<br>site transmission network failure. The evaluation found that three breakers failed, each with different causes.  |  |   |                       |                  |     |                      |     |                  |  |  |  |
| The first breaker failed to operate properly due to air and water contamination in the hydraulic fluid combined with low ambient temperature, and a defective motor contactor. Corrective actions were performing a hydraulic service and replacing the motor contactor.   |  |   |                       |                  |     |                      |     |                  |  |  |  |
| The second breaker failure was due to condensed water vapor in the pneumatic control valve freezing during cold-weather conditions. The corrective action taken was installing heaters.  |  |   |                       |                  |     |                      |     |                  |  |  |  |
| The third breaker failure was due to condensed water vapor in the pneumatic control valve freezing during cold-weather conditions and a failure in a trip circuit. Corrective actions taken were installing heaters and replacing the damage in the trip circuit.  |  |   |                       |                  |     |                      |     |                  |  |  |  |
| Station personnel performed a root cause ev<br>both the MT and MG, and human performand<br>The human performance issues are being ad   | ce issues o  | perating  | RCIC. The plant respo | nded to          | the | e transient as       | des | igned.           |  |  |  |

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| NRC FORM 366A U.S. NUCLEAR REGUL  | APPROVED BY OMB: NO. 3150-0104 EXPIRES: 10/31/2018  |  |  |  |                                     |  |                                       |                    |  |  |
|---|---|--|--|--|-------------------------------------|--|---------------------------------------|--------------------|--|--|
| (06-2016)<br>LICENSEE EVENT REPORT (LER)<br>CONTINUATION SHEET<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for completing this form<br>(See NUREG-1022, R.3 for instruction and guidance for compl |   |  |  |  |                                     |  |                                       |                    |  |  |
| http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1022/r3/) NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.  |   |  |  |  |                                     |  |                                       |                    |  |  |
| 1. FACILITY NAME  | -   | 2. DOCK  |  | YEAR   | T                                   | 3. LER NUMBER<br>SEQUENTIAL  | 3. LER NUMBER                         |                    |  |  |
| Columbia Generating Station   | 05000-  | <b>0-</b> 397  |  |  | _                                   | NUMBER<br>004  | -                                     | REV<br>NO.<br>01   |  |  |
| NARRATIVE   | 1   |  |  | [  |                                     |  |                                       |                    |  |  |
| NARRATIVE<br>Operating Experience and Previous Occurre<br>There were no occurrences of a scram due<br>Assessment of Safety Consequences<br>This event did not challenge the ability of Co<br>responded as designed. Human performan-<br>supplies to backup power supplies per desig<br>resulted in a full safety system actuation and<br>since HPCS was available, and was used, to<br>supplies as designed. The reduction of cool<br>action. There were no adverse impacts to the<br>industrial safety aspects resulting from this e<br>Energy Industry Identification System Inform<br>Energy Industry Identification System inform<br>brackets as [X] and [XX] throughout the bod  | to a loss of<br>ce issues re<br>gn. The read<br>a reduction<br>o maintain F<br>ling to the P<br>hose system<br>event.<br>hation<br>hation codes | nerating is<br>sulted in<br>ctor scra<br>n of cool<br>RPV leve<br>C did nc<br>ns due th<br>s from IE | Station to safely shutdow<br>a trip of RCIC, and an a<br>am and resulting transier<br>ing to the PC. The trip o<br>el. The power supplies to<br>ot challenge PC integrity,<br>his event. There were no | wn, and<br>automai<br>at cause<br>of RCIC<br>ransferr<br>and wa<br>o undes | tic t<br>wa<br>ed f<br>as r<br>irec | ransfer of pow<br>loss of RPS v<br>s not consequ<br>to backup pov<br>estored by op<br>d radiological o | ver<br>whi<br>uen<br>ver<br>era<br>or | ch<br>tial<br>itor |  |  |
|   |   |  |  |  |                                     |  | _                                     | ]                  |  |  |