

LICENSEE EVENT REPORT

CONTROL BLOCK: _____ (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0	1	I	L	D	R	S	3	2	0	0	-	0	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4			(5)
LICENSEE CODE							LICENSE NUMBER															LICENSE TYPE					CAT 58			

0	1	REPORT SOURCE	L	6	0	5	0	0	0	2	4	9	7	0	8	2	2	7	9	8	0	9	1	3	7	9	(9)
CON'T			DOCKET NUMBER										EVENT DATE					REPORT DATE									

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 While performing monthly surv. DIS 1300-2, Iso. Cond. Condensate Line Hi Flow Calib.,

03 DPIS 1349B tripped at 36.5 in. H2O increasing dp. T.S. Table 3.2.1 limit is <= 32

04 in. H2O dp. Safety significance minimal because redundant sw. would have provided

05 isolation at 29.4 in. H2O, conservative to Tech Spec limit. Similar events occurred

06 in R.O. #'s 79-5/03L-0 and 78-36/03L-0, Docket 050-249.

0	9	SYSTEM CODE	C	E	CAUSE CODE	E	CAUSE SUBCODE	G	COMPONENT CODE	I	N	S	T	R	U	COMP. SUBCODE	E	VALVE SUBCODE	Z										
(17) LER/RO REPORT NUMBER		EVENT YEAR		SEQUENTIAL REPORT NO.		OCCURRENCE CODE		REPORT TYPE		FRESHEN NO.		ACTION TAKEN		FUTURE ACTION		EFFECT ON PLANT		SHUTDOWN METHOD		HOURS		ATTACHMENT SUBMITTED		NPRD-4 FORM SUB.		PRIME COMP. SUPPLIER		COMMODITY MANUFACTURER	
7 9		7 9		0 2 2		0 3		L		0		E		Z		Z		Z		0 0 0		N		Y		N		B 0 8 0	

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

10 Cause attributable to instrument setpoint drift. Switch was immediately readjusted

11 to trip at 28.6 in. H2O dp increasing and repeatability was verified. Iso. Cond.

12 Condensate Line Hi Flow Sw.s will continue to be tested monthly using DIS 1300-2.

1	5	FACILITY STATUS	E	% POWER	0	7	5	OTHER STATUS	NA	METHOD OF DISCOVERY	B	DISCOVERY DESCRIPTION	Surveillance Testing
ACTIVITY CONTENT RELEASED OF RELEASE			AMOUNT OF ACTIVITY			LOCATION OF RELEASE							
Z			Z			NA							

1	7	PERSONNEL EXPOSURES	NUMBER	0	0	0	TYPE	Z	DESCRIPTION	N/A
---	---	---------------------	--------	---	---	---	------	---	-------------	-----

1	8	PERSONNEL INJURIES	NUMBER	0	0	0	DESCRIPTION	N/A
---	---	--------------------	--------	---	---	---	-------------	-----

1	9	LOSS OF OR DAMAGE TO FACILITY	TYPE	Z	DESCRIPTION	N/A
---	---	-------------------------------	------	---	-------------	-----

2	0	PUBLICITY ISSUED	N	DESCRIPTION	N/A
---	---	------------------	---	-------------	-----

7909200

NAME OF PREPARER Carl Lindberg

PHONE: X-289