

LICENSEE EVENT REPORT

CONTROL BLOCK:

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

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
8 9 14 15 25 26 30 57 CAT 58

1 REPORT SOURCE L 6 0 5 0 0 0 2 4 9 7 1 2 1 7 7 9 8 0 1 1 1 8 0 9
60 61 68 69 74 75 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)
2 During normal operation Control Room Operator observed no position indication for valve
3 MO 3-1501-3A. Upon investigation, it was found that feeder breaker was in the OFF
4 position. Shift Foreman verified that during proceeding midnight shift, valve
5 breaker had been in the ON position and had not been taken OOS since that time. Safety
6 significance minimal since redundant CCSW subsystem was operable. First time personnel
7 error was cause for this valve to become inoperable.

9 SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP. SUBCODE VALVE SUBCODE
S B 11 A 12 F 13 V A L V O P 14 A 15 Z 16
9 10 11 12 13 18 19 20

17 LER/RO REPORT NUMBER EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVISION NO.
7 9 - 0 3 5 / 0 3 L - 0
21 22 23 24 26 27 28 29 30 31 32

ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS ATTACHMENT SUBMITTED NPRD-4 FORM SUB. PRIME COMP. SUPPLIER COMPONENT MANUFACTURER
X 18 G 19 Z 20 Z 21 0 0 0 0 N 23 N 24 N 25 L 2 0 0 0 26
33 34 35 36 37 40 41 42 43 44 47

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)
1 0 Cause unknown. It is believed that a contractor inadvertently bumped switch for MO
1 1 3-1501-3A feeder brkr. to OFF position. Breaker was closed and electrical feed re-
1 2 stored. Valve added to procedure DOS 040-5, "Dresden Nuclear Power Station Daily ECCS
1 3 Valve and Pump Status Verification" to ensure daily valve position verification. No
1 4 further corrective action required.

5 FACILITY STATUS % POWER OTHER STATUS (30) METHOD OF DISCOVERY DISCOVERY DESCRIPTION (32)
E 28 0 6 7 29 N/A C 31 Operator Observation
8 9 10 12 13 44 45 46 80

6 ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT OF ACTIVITY (35) LOCATION OF RELEASE (36)
Z 33 Z 34 N/A N/A
8 9 10 11 44 45 80

7 PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION (39)
0 0 0 37 Z 38 N/A
8 9 11 12 13 80

8 PERSONNEL INJURIES NUMBER DESCRIPTION (41)
0 0 0 40 N/A
8 9 11 12 80

9 LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION (43)
Z 42 N/A
8 9 11 12 80

2 0 PUBLICITY ISSUED DESCRIPTION (45)
N 44 N/A
8 9 10 80

8001220 523

NRC USE ONLY

NAME OF PREPARER Gary L. Smith

PHONE: Ext. 489

GPO 917-926



Commonwealth Edison

DEVIATION REPORT

DR NO.	STA	UNIT	YEAR	NO.
D-12	-3	-79	-64	

PART 1 TITLE OF DEVIATION	OCURRED
LPCI/CCSW Hx. Serv. Wtr. Outlet MO 3-1501-3A-Feed Brkr Found Open	12-17-79 1520 DATE TIME

SYSTEM AFFECTED LPCI/CCSW	1500	PLANT CONDITIONS	TESTING
		MODE <u>Run</u> PWR(MWT) <u>1705</u> LOAD(MWE) <u>548</u>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

DESCRIPTION OF EVENT
Control Room Operator observed that there was no position indication on MO 3-1501-3A.
Equipment Attendant was sent to check feed brkr and found it turned off (open).

DESCRIPTION OF CAUSE
Unknown at this time.

OTHER APPLICABLE INFORMATION
Brkr was closed and elect. feed was restored to MO 3-1501-3A at 1537. Position indication was restored also.

EQUIPMENT FAILURE	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DR NO. N/A	WR NO. N/A	R. Facchina RESPONSIBLE SUPERVISOR	12-17-79 DATE
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PART 2 OPERATING ENGINEERS COMMENTS
Shift Foreman verified that he had noted MO 3-1501-3A valve breaker in on position during 12-17-79 midnight shift. No other ECCS equipment was out-of-service or known to be inop. During either midnight or day shifts of 12-17-79

TYPE OF DEVIATION REPORTABLE OCCURRENCE	EVENT OF POTENTIAL PUBLIC INTEREST	TECH SPEC VIOLATION	NON-REPORTABLE OCCURRENCE	ANNUAL REPORTING	SAFETY-RELATED WR ISSUED
<input type="checkbox"/> 14 DAY <input type="checkbox"/> 10CFR21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> 30 DAY NOTIFICATION 6.6.B.2.b					

REPORTABLE OCCURRENCE NUMBER	ACTION ITEM NO.	PROMPT ON-SITE NOTIFICATION
50X 79-35/03L-0		B. B. Stephenson 12/18/79 10:42 TITLE DATE TIME

24-HOUR NRC NOTIFICATION	PROMPT OFF-SITE NOTIFICATION
<input checked="" type="checkbox"/> TPH J. Barker (Courtesy) 12-17-79 1630 REGION III DATE TIME	F. Palmer 12/18/79 11:27 TITLE DATE TIME
<input type="checkbox"/> TGM REGION III & DOL DATE TIME	J. Gilliom 12/18/79 11:27 TITLE DATE TIME

RESPONSIBLE COMPANY OFFICER INFORMED OF 10CFR21 CONDITIONS AND THEIR REPORT TO NRC

REVIEW AND COMPLETED Michael Wright 12/18/79
OPERATING ENGINEER DATE

ACCEPTANCE BY STATION REVIEW AS REQUIRED
DATE 1-11-80
RESOLUTION APPROVED AND AUTHORIZED FOR DISTRIBUTION
STATION SUPERINTENDENT [Signature] DATE 1/11/80