



Commonwealth Edison

Dresden Nuclear Power Station

R.R. #1

Morris, Illinois 60450

Telephone 815/942-2920

ASB

May 8, 1981

DJS LTR #81-390

Mr. James G. Keppler, Regional Director
Directorate of Regulatory Operations - Region III
U. S. Nuclear Regulatory Commission
799 Roosevelt Road
Glen Ellyn, IL 60137

Reportable Occurrence Report #81-12/03L-0, Docket #050-249 is being submitted to your office in accordance with Dresden Nuclear Power Station Technical Specification 6.6.B.2.(b), conditions leading to operation in a degraded mode permitted by a limiting condition for operation or plant shutdown required by a limiting condition for operation.

D. J. Scott

D. J. Scott
Station Superintendent
Dresden Nuclear Power Station

DJS/kmj

Enclosure

cc: Director of Inspection & Enforcement
Director of Management Information & Program Control
U. S. NRC, Document Mgt. Branch
File/NRC

MAY 13 1981

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

CON'T REPORT SOURCE L 6 0 5 0 0 0 2 4 9 7 0 4 1 2 8 1 8 0 5 0 4 8 1 9

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 During normal operation, a drywell oxygen analyzer low flow alarm was received. This was of minimal safety significance since oxygen concentration was less than T.S. (3.7.A.5.a) limit of 4 percent and daily samples are taken to verify this condition. There was no effect on public health or safety. This is the first occurrence of this type at Dresden.

0 9 SYSTEM CODE I E 11 CAUSE CODE E 12 CAUSE SUBCODE F 13 COMPONENT CODE P U M P X X 14 COMP. SUBCODE C 15 VALVE SUBCODE Z 16 LER/RO REPORT NUMBER 17 8 1 EVENT YEAR 8 1 22 SEQUENTIAL REPORT NO. 0 1 2 26 OCCURRENCE CODE 0 3 29 REPORT TYPE L 30 REVISION NO. 0 32 ACTION TAKEN A 18 FUTURE ACTION Z 19 EFFECT ON PLANT Z 20 SHUTDOWN METHOD Z 21 HOURS 0 0 0 0 22 ATTACHMENT SUBMITTED N 23 NPRD-4 FORM SUB. N 24 PRIME COMP. SUPPLIER N 25 COMPONENT MANUFACTURER G 0 8 0 26

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 The cause of this event was a stretched belt on the oxygen analyzer pump. The belt was replaced and the system was returned to service. No further action is deemed necessary.

1 5 FACILITY STATUS E 28 % POWER 0 8 6 29 OTHER STATUS NA 30 METHOD OF DISCOVERY A 31 DISCOVERY DESCRIPTION Operator Observation 32

1 6 ACTIVITY CONTENT Z 33 Z 34 AMOUNT OF ACTIVITY NA 35 LOCATION OF RELEASE NA 36

1 7 PERSONNEL EXPOSURES NUMBER 0 0 0 37 TYPE Z 38 DESCRIPTION NA 39

1 3 PERSONNEL INJURIES NUMBER 0 0 0 40 DESCRIPTION NA 41

1 9 LOSS OF OR DAMAGE TO FACILITY TYPE Z 42 DESCRIPTION NA 43

2 0 PUBLICITY ISSUED N 44 DESCRIPTION NA 45



Commonwealth Edison

DEVIATION REPORT

DVR NO.	STA	UNIT	YEAR	NO.
	D-12	- 3	- 81	- 26

PART 1 TITLE OF DEVIATION: Unit 3 Drywell Oxygen Analyzer Low Flow

SYSTEM AFFECTED: 1600

PLANT CONDITIONS: MODE Run PWR(MWT) 2176.8 LOAD(MWE) 708

OCURRED DATE: 4/12/81 TIME: 1415

Pressure Suppression System TESTING YES NO

DESCRIPTION OF EVENT: Received low flow alarm on Unit 3 Drywell Oxygen Analyzer. Upon investigation, found the pump drive belt stretched out, almost broken in two, and off the pulleys.

DESCRIPTION OF CAUSE: Belt failure.

OTHER APPLICABLE INFORMATION: Could not put belt back on the pulleys, recorded in Degraded Equipment Log.

EQUIPMENT FAILURE	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DR NO.	WR NO.	RESONSIBLE SUPERVISOR	DATE
		NA	D12749	K. L. Tupman	4/13/81

PART 2 OPERATING ENGINEERS COMMENTS: Drywell Oxygen concentration was significantly less than 4% (the Tech Spec limit) when the Oxygen Analyzer became inoperable. The proper entries were made in the Degraded Equipment Log.

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 checked="" type="checkbox"/> 30 DAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
NOTIFICATION 6.6.B.2.b					

REPORTABLE OCCURRENCE NUMBER	ACTION ITEM NO.	PROMPT ON-SITE NOTIFICATION
81-12/03L-0		R. M. Ragan TITLE: _____ DATE: 4/14/81 TIME: 0900
		TITLE: _____ DATE: _____ TIME: _____

24-HOUR NRC NOTIFICATION (Courtesy)	PROMPT OFF-SITE NOTIFICATION
<input checked="" type="checkbox"/> In person XXXX Tom Tongue REGION III DATE: 4-13-81 TIME: 0800	F. Palmer TITLE: _____ DATE: 4/14/81 TIME: 1035
<input type="checkbox"/> TGM REGION III & DOL DATE: _____ TIME: _____	TITLE: _____ DATE: _____ TIME: _____

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

REVIEW AND COMPLETED: Michael Wright OPERATING ENGINEER DATE: 4/14/81

ACCEPTANCE BY STATION REVIEW AS REQUIRED

DATE: _____

RESOLUTION APPROVED AND AUTHORIZED FOR DISTRIBUTION

J. Bruner 5/11/81

Michael Wright 5-11-81

R. M. Ragan Jr 5/11/81

STATION SUPERINTENDENT DATE