

LICENSEE EVENT REPORT

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

0 1 | M I D C C I | 2 | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 3 | 4 | 1 | 1 | 1 | 1 | 1 | 1 | 4 | 5
7 8 9 LICENSEE CODE 14 15 LICENSE NUMBER 25 26 LICENSE TYPE 30 57 CAT 58

CON'T
0 1 | L | 6 | 0 5 0 0 0 3 1 5 | 7 | 1 1 2 7 7 9 | 8 | 1 2 2 7 7 9 | 9
7 8 REPORT SOURCE 60 61 DOCKET NUMBER 68 69 EVENT DATE 74 75 REPORT DATE 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)
0 2 | WHILE OPERATING IN MODE 1, BOTH BORIC ACID TRANSFER PUMPS WERE MADE INOPERABLE
0 3 | FOR A PERIOD OF 4 HOURS AND 40 MINUTES. THIS WAS CONTRARY TO TECH. SPEC. 3.1.2.2.
0 4 | THE ALTERNATE FLOW PATH FROM THE REFUELING WATER STORAGE TANK REMAINED OPERABLE.
0 5 |
0 6 |
0 7 |
0 8 |

0 9 | R B | 11 | X | 12 | Z | 13 | Z Z Z Z Z Z | 14 | Z | 15 | Z | 16
7 8 SYSTEM CODE 9 10 CAUSE CODE 11 CAUSE SUBCODE 12 COMPONENT CODE 13 COMP. SUBCODE 14 VALVE SUBCODE 15 16

(17) LER/RO REPORT NUMBER | 7 9 | 21 | 22 | 0 6 3 | 24 | 26 | / | 27 | 0 3 | 28 | 29 | L | 30 | | 31 | 0 | 32
EVENT YEAR 21 SEQUENTIAL REPORT NO. 24 OCCURRENCE CODE 28 REPORT TYPE 30 REVISION NO. 32
ACTION TAKEN 33 | X | 18 | Z | 19 | Z | 20 | Z | 21 | 0 0 0 0 | 22 | 23 | N | 24 | Z | 25 | Z 9 9 9 | 26
FUTURE ACTION 34 EFFECT ON PLANT 35 SHUTDOWN METHOD 36 HOURS 40 ATTACHMENT SUBMITTED 41 NPRD-4 FORM SUB. 42 PRIME COMP. SUPPLIER 43 COMPONENT MANUFACTURER 44

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)
1 0 | THE BORIC ACID TRANSFER PUMPS WERE INTENTIONALLY MADE INOPERABLE TO UNPLUG A
1 1 | BRANCH LINE THAT HAD SOLIDIFIED. TIMING WAS SELECTED WHEN BORATION WAS NOT
1 2 | ANTICIPATED.
1 3 |
1 4 |

1 5 | E | 28 | 1 0 0 0 | 29 | NA | 30 | B | 31 | OPERATOR OBSERVATION | 32
7 8 9 FACILITY STATUS 10 % POWER 11 OTHER STATUS 12 METHOD OF DISCOVERY 13 DISCOVERY DESCRIPTION 14

1 6 | Z | 33 | Z | 34 | NA | 35 | NA | 36
7 8 9 ACTIVITY CONTENT 10 RELEASED OF RELEASE 11 AMOUNT OF ACTIVITY 12 LOCATION OF RELEASE 13

1 7 | 0 0 0 | 37 | Z | 38 | NA | 39
7 8 9 PERSONNEL EXPOSURES 10 NUMBER 11 TYPE 12 DESCRIPTION 13

1 8 | 0 0 0 | 40 | NA | 41
7 8 9 PERSONNEL INJURIES 10 NUMBER 11 DESCRIPTION 12

1 9 | Z | 42 | NA | 43
7 8 9 LOSS OF OR DAMAGE TO FACILITY 10 TYPE 11 DESCRIPTION 12

2 0 | N | 44 | NA | 45
7 8 9 PUBLICITY ISSUED 10 DESCRIPTION 11
NAME OF PREPARER R. S. LEASE
PHONE: (616) 465-5901 X-313

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Dup
NRC USE ONLY

