

LICENSEE EVENT REPORT

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

01 MIDCIC 1 2 00000000000000 3 4 1 1 1 1 1 4 5
7 8 9 14 15 25 26 30 57 CAT 58

CON'T
01 REPORT SOURCE 6 0 5 0 0 0 3 1 5 7 0 9 2 9 8 0 8 1 0 2 1 8 0 9
7 8 60 61 68 69 74 75 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 WHILE PERFORMING A SURVEILLANCE TEST ON THE CONTAINMENT ISOLATION VALVES, IT WAS DIS-
03 COVERED THAT ONE OF THE GLYCOL ISOLATION VALVES WOULD NOT FULLY CLOSE. THIS SYSTEM
04 IS FILLED WITH GLYCOL AND DOES NOT PROVIDE A DIRECT PATH FOR THE CONTAINMENT ATMOS-
05 PHERE TO THE OUTSIDE. THE GLYCOL LINE IS EQUIPPED WITH TWO ISOLATION VALVES; IN THE
06 EVENT ONE VALVE FAILS THE OTHER VALVE ASSURES ISOLATION, AND THEREFORE, THIS CONDITION
07 HAD NO EFFECT ON THE PUBLIC HEALTH AND SAFETY.

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09 SYSTEM CODE [S][D] (11) CAUSE CODE [X] (12) CAUSE SUBCODE [Z] (13) COMPONENT CODE [P][E][N][E][T][R] (14) COMP. SUBCODE [F] (15) VALVE SUBCODE [Z] (16)
7 8 9 10 11 12 13 18 19 20
17 LER/RO REPORT NUMBER [8][0] (17) EVENT YEAR [8][0] (21) SEQUENTIAL REPORT NO. [0][2][5] (24) OCCURRENCE CODE [0][3] (28) REPORT TYPE [L] (30) REVISION NO. [0] (32)
7 8 21 22 23 24 26 27 28 29 30 31 32
ACTION TAKEN [G] (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 [L] (25) COMPONENT MANUFACTURER [I][2][0][7] (26)
7 8 33 34 35 36 37 40 41 42 43 44 47

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

10 NO VISIBLE CAUSE COULD BE DISCERNED TO KEEP THE VALVE FROM FULLY CLOSING. THE VALVE
11 WAS EXERCISED BY OPENING AND CLOSING SEVERAL TIMES AND IT FUNCTIONED CORRECTLY. THE
12 SURVEILLANCE TESTING HAS NOW BEEN INCREASED FROM QUARTERLY TO MONTHLY FOR THESE GLY-
13 COL ISOLATION VALVES.

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15 FACILITY STATUS [E] (28) % POWER [0][9][9] (29) OTHER STATUS [NA] (30) METHOD OF DISCOVERY [B] (31) OPERATOR OBSERVATION [OPERATOR OBSERVATION] (32)
7 8 9 10 12 13 44 45 46 80

16 ACTIVITY CONTENT RELEASED OF RELEASE [Z] (33) [Z] (34) AMOUNT OF ACTIVITY [NA] (35) LOCATION OF RELEASE [NA] (36)
7 8 9 10 44 45 80

17 PERSONNEL EXPOSURES NUMBER [0][0][0] (37) TYPE [Z] (38) DESCRIPTION [NA] (39)
7 8 9 11 13 80

18 PERSONNEL INJURIES NUMBER [0][0][0] (40) DESCRIPTION [NA] (41)
7 8 9 11 12 80

19 LOSS OF OR DAMAGE TO FACILITY TYPE [Z] (42) DESCRIPTION [NA] (43)
7 8 9 11 12 80

20 PUBLICITY ISSUED [N] (44) DESCRIPTION [NA] (45)
7 8 9 10 80

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