

LICENSEE EVENT REPORT

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

01 | FIL | TP | S | 4 | 2 | 00 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 1 | 1 | 1 | 1 | 4 | 5

CON'T
01 | REPORT SOURCE | L | 6 | 0 | 5 | 0 | 0 | 0 | 2 | 5 | 1 | 7 | 0 | 6 | 2 | 2 | 7 | 19 | 3 | 0 | 7 | 2 | 3 | 7 | 19 | 9

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)
 02 | During routine startup operation, charging system performance was noted to
 03 | be degraded. During operation (pursuant to TS 3.6.d) the cause of the
 04 | problem was determined to be air inleakage into the charging pump suction
 05 | header. The pumps were alternately vented and the cause of the air
 06 | inleakage was corrected. TS 3.6.c.1 could not be met for 1 1/4 hrs.
 07 | Alternate boration paths remained available during this occurrence.

019 | SYSTEM CODE | P | C | 11 | CAUSE CODE | E | 12 | CAUSE SUBCODE | Z | 13 | COMPONENT CODE | V | A | L | V | E | X | 14 | COMP. SUBCODE | D | 15 | VALVE SUBCODE | G | 16

17 | LER/RO REPORT NUMBER | 7 | 19 | EVENT YEAR | 7 | 19 | SEQUENTIAL REPORT NO. | 0 | 1 | 1 | OCCURRENCE CODE | 0 | 3 | REPORT TYPE | L | REVISION NO. | 0

ACTION TAKEN | A | 18 | FUTURE ACTION | Z | 19 | EFFECT ON PLANT | Z | 20 | SHUTDOWN METHOD | Z | 21 | HOURS | 0 | 0 | 0 | 22 | ATTACHMENT SUBMITTED | N | 23 | APPROX. FORM SUB. | Y | 24 | PRIME COMP. SUPPLIER | N | 25 | COMPONENT MANUFACTURER | G | 2 | 5 | 5 | 25

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)
 10 | The root cause of the air inleakage was a ruptured diaphragm in conjunction
 11 | with a damaged "O"-ring on valve FCV-3-113B. This valve is in the flow
 12 | path between the boric acid blender and the charging pump suction header.
 13 | The valve was repaired and the pumps were vented.

15 | FACILITY STATUS | C | 28 | POWER | 0 | 4 | 5 | 29 | OTHER STATUS | NA | 30 | METHOD OF DISCOVERY | A | 31 | DISCOVERY DESCRIPTION | Operator observation. | 32

15 | ACTIVITY RELEASED OF RELEASE | Z | 33 | Z | 34 | AMOUNT OF ACTIVITY | NA | 35 | LOCATION OF RELEASE | NA | 36

17 | PERSONNEL EXPOSURES NUMBER | 0 | 0 | 0 | 37 | TYPE | Z | 38 | DESCRIPTION | NA | 39

18 | PERSONNEL INJURIES NUMBER | 0 | 0 | 0 | 40 | DESCRIPTION | NA | 41

19 | LOSS OF OR DAMAGE TO FACILITY TYPE | Z | 42 | DESCRIPTION | NA | 43

20 | PUBLICITY ISSUED DESCRIPTION | N | 44 | DESCRIPTION | NA | 45

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