

LICENSEE EVENT REPORT

CONTROL BLOCK: _____ ①

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0 1	N	J	S	G	S	1	2	0	0	-	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4	5
7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33
LICENSEE CODE						LICENSE NUMBER						LICENSE TYPE						CAT 58								

CON'T

0 1	L	6	0	5	0	0	0	2	7	2	7	1	2	0	6	7	8	8	0	1	0	4	7	9	9
7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
REPORT SOURCE		DOCKET NUMBER						EVENT DATE						REPORT DATE											

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES ⑩

0 2 | During normal operation, RCS leakage calculations showed leakage greater than 1 gpm.

0 3 | Inspection of containment showed no excessive leakage. The sump pump magnetrol was

0 4 | found to be overdue for calibration. Action Statement for T/S 3.4.6.1.b was

0 5 | implemented and a work order initiated for maintenance to calibrate the magnetrol.

0 6 | The system was returned to service in seven days and the Action Statement was ter-

0 7 | minated. The containment sump was measured periodically during period of inoperabili-

0 8 | ty. This is the first occurrence of this type.

0 9	C	I	11	A	12	X	13	C	K	T	B	K	R	14	C	15	Z	16	17	7	8	0	8	1	0	3	L	0	0	18	X	19	Z	20	Z	21	0	0	0	0	22	Y	23	N	24	L	25	M	0	4	0	26
7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50									
SYSTEM CODE		CAUSE CODE		CAUSE SUBCODE		COMPONENT CODE						COMP. SUBCODE		VALVE SUBCODE		EVENT YEAR		SEQUENTIAL REPORT NO.		OCCURRENCE CODE		REPORT TYPE		REVISION NO.		ACTION TAKEN		FUTURE ACTION		EFFECT ON PLANT		SHUTDOWN METHOD		HOURS		ATTACHMENT SUBMITTED		NPRD-4 FORM SUB.		PRIME COMP. SUPPLIER		COMPONENT MANUFACTURER										

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS ⑳

1 0 | The responsibility for the 18 month calibration surveillance was misassigned after

1 1 | the original calibration by contract personnel. The magnetrol was recalibrated and

1 2 | responsibility for the surveillance was assigned to the Maintenance Department. An

1 3 | Inspection Order Request has been submitted to have this calibration entered into the

1 4 | computer callout system.

1 5	E	28	1	0	0	29	N/A	30	C	31	RCS Leakage Calculation	32	
7	8	9	10	11	12	13	14	15	16	17	18	19	
FACILITY STATUS		% POWER					OTHER STATUS		METHOD OF DISCOVERY				DISCOVERY DESCRIPTION

1 6	Z	33	Z	34	N/A	35	N/A	36	N/A
7	8	9	10	11	12	13	14	15	16
ACTIVITY CONTENT			AMOUNT OF ACTIVITY			LOCATION OF RELEASE			

1 7	0	0	0	37	Z	38	N/A	39
7	8	9	10	11	12	13	14	15
PERSONNEL EXPOSURES		TYPE		DESCRIPTION				

1 8	0	0	0	40	N/A	41
7	8	9	10	11	12	13
PERSONNEL INJURIES		DESCRIPTION				

1 9	Z	42	N/A	43
7	8	9	10	11
LOSS OF OR DAMAGE TO FACILITY		DESCRIPTION		

2 0	Z	44	N/A	45	7901090193	68	69	80
7	8	9	10	11	12	13	14	15
PUBLICITY ISSUED		DESCRIPTION		NRC USE ONLY				