

NRC DISTRIBUTION FOR PART 50 DOCKET MATERIAL

TO:
MR. NORMAN C. MOSELEY

FROM:
FLORIDA POWER & LIGHT CO.
MIAMI, FLORIDA
A. D. SCHMIDT

DATE OF DOCUMENT
4/27/76

DATE RECEIVED
5/11/76

LETTER
 ORIGINAL
 COPY

NOTORIZED
 UNCLASSIFIED

PROP

INPUT FORM

NUMBER OF COPIES RECEIVED
ONE SIGNED

DESCRIPTION

LTR. TRANS THE FOLLOWING:

PLANT NAME:
ST. LUCIE \$1

ENCLOSURE

LICENSEE EVENT RPT. (RO 50-335/76-8) ON 3/27/76
- CONCERNING TWO FEMALE UNIONS WHICH WERE
IMPROPERLY WELDED INTO COOLING LINES FOR
LPSI PUMPS 1A & 1B DURING POST CORE PREOPERAT-
IONAL TESTING.

ACKNOWLEDGED

DO NOT REMOVE

NOTE: IF PERSONNEL EXPOSURE IS INVOLVED
SEND DIRECTLY TO KREGER/J. COLLINS

SAFETY		FOR ACTION/INFORMATION		ENVIRO	5/13/76	RJL
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	W/3 CYS FOR ACTION					
<input checked="" type="checkbox"/>	LIC. ASST:	DIGGS				
	W// CYS					
	ACRS 16 CYS HOLDING/SENT TO LA					

INTERNAL DISTRIBUTION						
<input checked="" type="checkbox"/>	REG FILE					
<input checked="" type="checkbox"/>	NRC PDR					
<input checked="" type="checkbox"/>	I & E (2)					
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<input checked="" type="checkbox"/>	SCHROEDER/IPPOLITO					
<input checked="" type="checkbox"/>	HOUSTON					
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<input checked="" type="checkbox"/>	CASE					
<input checked="" type="checkbox"/>	F. WILLIAMS					
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<input checked="" type="checkbox"/>	TEDESCO/MACCARY					
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<input checked="" type="checkbox"/>	BAER					
<input checked="" type="checkbox"/>	SHAO					
<input checked="" type="checkbox"/>	VOLLMER/BUNCH					
<input checked="" type="checkbox"/>	KREGER/J. COLLINS					

EXTERNAL DISTRIBUTION				CONTROL NUMBER		
<input checked="" type="checkbox"/>	L.PDR: FT. PIERCE, FL.					
<input checked="" type="checkbox"/>	TIC					
<input checked="" type="checkbox"/>	NSIC					4659

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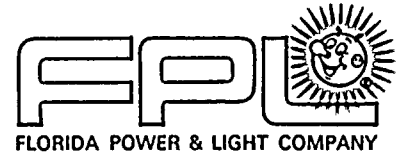
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April 27, 1976

PRN-LI-76-100

Mr. Norman C. Moseley, Director, Region II
Office of Inspection and Enforcement
U. S. Nuclear Regulatory Commission
230 Peachtree Street, N.W., Suite 818
Atlanta, Georgia 30303



Dear Mr. Moseley:

REPORTABLE OCCURRENCE 335-76-8
ST. LUCIE UNIT 1
DATE OF OCCURRENCE: MARCH 27, 1976

IMPROPER WELDING

The attached Licensee Event Report is being submitted in accordance with Technical Specification 6.9 to provide 30-day notification of the subject occurrence.

Very truly yours,

J R Bensen
for A. D. Schmidt
Vice President
Power Resources

MAS/cpc

Attachment

cc: Jack R. Newman, Esquire
Director, Office of Inspection and Enforcement (30)
Director, Office of Management Information and
Program Control (3)



Regulatory Docket File

4659

LICENSEE EVENT REPORT

CONTROL BLOCK:

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(PLEASE PRINT ALL REQUIRED INFORMATION)

LICENSEE NAME:

01	F	L	S	L	S	1
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 LICENSE NUMBER:

0	0	-	0	0	0	0	0	-	0	0
---	---	---	---	---	---	---	---	---	---	---

 LICENSE TYPE:

4	1	1	1	1
---	---	---	---	---

 EVENT TYPE:

0	3
---	---

CATEGORY:

01	CONT
----	------

 REPORT TYPE:

L

 REPORT SOURCE:

L

 DOCKET NUMBER:

0	5	0	-	0	3	3	5
---	---	---	---	---	---	---	---

 EVENT DATE:

0	3	2	7	7	6
---	---	---	---	---	---

 REPORT DATE:

0	4	2	7	7	6
---	---	---	---	---	---

EVENT DESCRIPTION

02

 On March 27, during post-core preoperational testing, two female unions

03

 were improperly welded into the cooling lines for LPSI pumps 1A and 1B.

04

 The welding was not performed in accordance with Criterion IX of

05

 Appendix B to 10 CFR Part 50. The following discrepancies were found

06

 during Quality Control surveillance on March 28: (1) the welding

SYSTEM CODE:

W	B
---	---

 CAUSE CODE:

A

 COMPONENT CODE:

P	I	P	E	X	X
---	---	---	---	---	---

 PRIME COMPONENT SUPPLIER:

A

 COMPONENT MANUFACTURER:

I	0	7	5
---	---	---	---

 VIOLATION:

N

CAUSE DESCRIPTION

08

 The plant work order used for this job did not include welding and non-

09

 destructive testing instructions. Quality Control review of the work

10

 order did not result in a request for additional welding information.

FACILITY STATUS:

B

 % POWER:

0	0	0
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 OTHER STATUS:

NA

 METHOD OF DISCOVERY:

B

 DISCOVERY DESCRIPTION:

Quality Control Surveillance

FORM OF ACTIVITY RELEASED:

Z

 CONTENT OF RELEASE:

Z

 AMOUNT OF ACTIVITY:

NA

 LOCATION OF RELEASE:

NA

PERSONNEL EXPOSURES

NUMBER:

0	0	0
---	---	---

 TYPE:

Z

 DESCRIPTION:

NA

PERSONNEL INJURIES

NUMBER:

0	0	0
---	---	---

 DESCRIPTION:

NA

PROBABLE CONSEQUENCES

15

NA

LOSS OR DAMAGE TO FACILITY

TYPE:

Z

 DESCRIPTION:

NA

PUBLICITY

17

NA

ADDITIONAL FACTORS

18

 See Page Two for continuation of Event and Cause Descriptions.

19

NAME: M. A. Schoppman

PHONE: 305/552-3779

REPORTABLE OCCURRENCE 335-76-8
LICENSEE EVENT REPORT
PAGE TWO

Event Description (continued)

procedure was not qualified, (2) the welder was not qualified, and (3) non-destructive testing (NDT) was not performed. Corrective action was to have a qualified welder cut out and replace the unions according to a qualified procedure, after which the required NDT was conducted. The unions were 3/4 inch steel replacement female unions, Ingersoll-Rand P/N 8, on Drawing V-8x21AL 32lx7-A. This was the first occurrence of this type. (335-76-8).

Cause Description (continued)

Followup corrective action includes a training program to qualify maintenance personnel according to ANSI welding standards and to have Quality Control surveillance precede welding in the future.

