

VIRGINIA ELECTRIC AND POWER COMPANY

RICHMOND, VIRGINIA 23261

November 5, 1976

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

Serial No. 308  
PO&M/ALH:clw

Docket No. 50-281  
License No. DPR-37

Dear Mr. Moseley:

Pursuant to Surry Power Station Technical Specification 6.6.B.2, the Virginia Electric and Power Company hereby submits a copy of Licensee Event Report USRE-S2-76-15.

The substance of this report has been reviewed by the Station Nuclear Safety and Operating Committee and will be placed on the agenda for the next meeting of the System Nuclear Safety and Operating Committee.

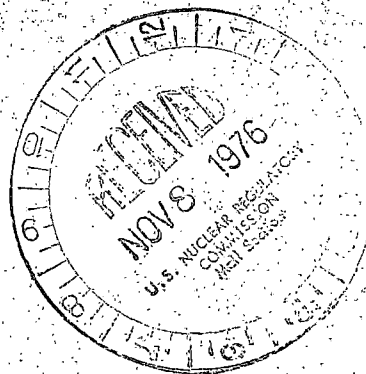
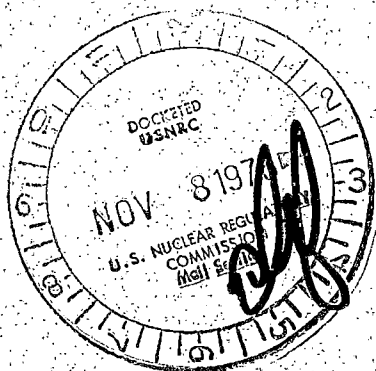
Very truly yours,

*C. M. Stallings*

C. M. Stallings  
Vice President-Power Supply  
and Production Operations

Enclosure

cc: Mr. Robert W. Reid, Chief ✓  
Operating Reactors Branch 4  
(40 copies USRE-S2-76-15)



# LICENSEE EVENT REPORT

USRE-S2-76-15

CONTROL BLOCK: 

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

(PLEASE PRINT ALL REQUIRED INFORMATION)

|               |      |             |    |               |    |               |    |                |   |            |   |   |   |             |   |              |   |   |   |            |   |   |   |   |   |
|---------------|------|-------------|----|---------------|----|---------------|----|----------------|---|------------|---|---|---|-------------|---|--------------|---|---|---|------------|---|---|---|---|---|
| LICENSEE NAME |      |             |    |               |    |               |    | LICENSE NUMBER |   |            |   |   |   |             |   | LICENSE TYPE |   |   |   | EVENT TYPE |   |   |   |   |   |
| 01            | V    | A           | S  | P             | S  | 2             |    | 0              | 0 | -          | 0 | 0 | 0 | 0           | 0 | -            | 0 | 0 | 4 | 1          | 1 | 1 | 0 | 0 | 3 |
| 7             | 8    | 9           |    |               |    | 14            | 15 |                |   |            |   |   |   |             |   |              |   |   |   |            |   |   |   |   |   |
| CATEGORY      |      | REPORT TYPE |    | REPORT SOURCE |    | DOCKET NUMBER |    |                |   | EVENT DATE |   |   |   | REPORT DATE |   |              |   |   |   |            |   |   |   |   |   |
| 01            | CONT | M           | I  | L             | L  | 0             | 5  | 0              | - | 0          | 2 | 8 | 1 | 1           | 0 | 0            | 6 | 7 | 6 | 1          | 1 | 0 | 3 | 7 | 6 |
| 7             | 8    | 57          | 58 | 59            | 60 | 61            |    |                |   |            |   |   |   |             |   |              |   |   |   |            |   |   |   |   |   |

### EVENT DESCRIPTION

|    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
| 02 | With Unit No. 2 at cold shutdown, leakage of water was observed from "A" recirculation |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
| 03 | spray heat exchanger piping. Further visual inspection and dye penetrant examinations  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
| 04 | revealed indications of cracking in the heat affected zones of several welds. This     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
| 05 | event is reportable per Technical Specification 6.6.2.b(4). (USRE-S2-76-15)            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
| 06 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |

|             |   |            |    |                |    |   |   |                          |   |                        |   |   |           |   |   |  |  |  |  |  |  |  |  |  |  |
|-------------|---|------------|----|----------------|----|---|---|--------------------------|---|------------------------|---|---|-----------|---|---|--|--|--|--|--|--|--|--|--|--|
| SYSTEM CODE |   | CAUSE CODE |    | COMPONENT CODE |    |   |   | PRIME COMPONENT SUPPLIER |   | COMPONENT MANUFACTURER |   |   | VIOLATION |   |   |  |  |  |  |  |  |  |  |  |  |
| 07          | S | H          | E  | P              | I  | P | E | X                        | X | A                      | Z | 9 | 9         | 9 | N |  |  |  |  |  |  |  |  |  |  |
| 7           | 8 | 9          | 10 | 11             | 12 |   |   |                          |   |                        |   |   |           |   |   |  |  |  |  |  |  |  |  |  |  |

### CAUSE DESCRIPTION

|    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
| 08 | The apparent cause of failure was chloride stress corrosion in Type 304 stainless        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
| 09 | steel piping. Further investigation is being performed on Unit No. 1 and Unit No. 2,     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
| 10 | since both units utilize a similar arrangement for the recirculation spray system (cont) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |

|                           |   |                    |    |    |                    |    |  |                     |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---------------------------|---|--------------------|----|----|--------------------|----|--|---------------------|--|-----------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| FACILITY STATUS           |   | % POWER            |    |    | OTHER STATUS       |    |  | METHOD OF DISCOVERY |  | DISCOVERY DESCRIPTION |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11                        | G | 0                  | 0  | 0  | N/A                |    |  | C                   |  | N/A                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7                         | 8 | 9                  | 10 | 11 | 12                 | 13 |  |                     |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FORM OF ACTIVITY RELEASED |   | CONTENT OF RELEASE |    |    | AMOUNT OF ACTIVITY |    |  | LOCATION OF RELEASE |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12                        | Z | Z                  |    |    | N/A                |    |  |                     |  | N/A                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7                         | 8 | 9                  | 10 | 11 |                    |    |  |                     |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

### PERSONNEL EXPOSURES

|        |   |      |    |             |     |
|--------|---|------|----|-------------|-----|
| NUMBER |   | TYPE |    | DESCRIPTION |     |
| 13     | 0 | 0    | 0  | Z           | N/A |
| 7      | 8 | 9    | 11 | 12          | 13  |

### PERSONNEL INJURIES

|        |   |             |    |     |
|--------|---|-------------|----|-----|
| NUMBER |   | DESCRIPTION |    |     |
| 14     | 0 | 0           | 0  | N/A |
| 7      | 8 | 9           | 11 | 12  |

### OFFSITE CONSEQUENCES

|    |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|----|-----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
| 15 | N/A |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
|----|-----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|

### LOSS OR DAMAGE TO FACILITY

|      |   |             |    |     |
|------|---|-------------|----|-----|
| TYPE |   | DESCRIPTION |    |     |
| 16   | Z |             |    | N/A |
| 7    | 8 | 9           | 10 |     |

### PUBLICITY

|    |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|----|-----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
| 17 | N/A |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
|----|-----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|

### ADDITIONAL FACTORS

|    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
| 18 | The health and safety of the general public were not affected. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
|----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|

|    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
| 19 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80 |
|----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|

NAME: Tyndall L. Baucom

PHONE: (804) 357-3184

CAUSE DESCRIPTION (con't)

pipng. The extent of affected piping, the degree of damage, and the necessary repairs have not been completely evaluated at this time, and will be the subject of a future update report. Repairs as necessary will be accomplished prior to placing the units back into service.