



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
799 ROOSEVELT ROAD
GLEN ELLYN, ILLINOIS 60137

PDR

JUN 7 1979

Docket No. 50-341

The Detroit Edison Company
ATTN: Mr. Edward Hines, Assistant
Vice President and Manager
Quality Assurance
2000 Second Avenue
Detroit, MI 48226

Gentlemen:

This Information Notice is provided as an early notification of a possibly significant matter. It is expected that recipients will review the information for possible applicability to their facilities. No specific action or response is requested at this time. If further NRC evaluations so indicate, an IE Circular, Bulletin, or NRR Generic Letter will be issued to recommend or request specific licensee actions. If you have questions regarding the matter, please contact the Director of the appropriate NRC Regional Office.

Sincerely,

James G. Keppler
for James G. Keppler
Director

Enclosure: IE Information
Notice No. 79-15

cc w/encl:
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U.S. NUCLEAR REGULATORY COMMISSION
OFFICE OF INSPECTION AND ENFORCEMENT

REGION III

June 7, 1979

IE Information Notice No. 79-15

DEFICIENT PROCEDURES

Summary

On June 2, 1979, at Arkansas Nuclear One - Unit 1, while observing conditions in the control room, an NRC inspector discovered an operational deficiency that could have resulted in the emergency feedwater system remaining isolated during subsequent power operation.

Description of Circumstances

On June 2 while Arkansas Nuclear One - Unit 1 was preparing for startup, an NRC inspector in the control room found that during a surveillance test of the main feedwater check valves, the controls of the emergency feedwater system were positioned so that the system could not automatically respond if needed. The NRC inspector found that the test procedure being used by the licensed operators did not include, as it should have, instructions either to bypass the emergency feedwater system or to return it to normal. The plant operators, without approved procedures covering this aspect of the test, bypassed the controls that would have started the feedwater system automatically. Lacking a procedural requirement to return the system to normal, there was no assurance that emergency feedwater would be provided automatically if needed.

Following the Three Mile Island accident, the NRC required that operators be trained to initiate promptly the emergency feedwater system manually if it does not come on automatically. Thus, while no immediate safety hazard existed at the Arkansas Unit 1 plant because of the improper action, the NRC staff is concerned about the potential safety hazard of leaving the emergency feedwater system in the bypassed condition, about the possibility that other procedures at the Arkansas plant may be deficient and about the fact that the operators deviated from procedures in performing the surveillance test.

Arkansas Power and Light Company has returned the plant to cold shutdown. The June 2, 1979, NRC Order confirmed the requirement for a cold shutdown until the Commission staff controlling the development of procedures, and until their from those procedures.

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