

### LICENSEE EVENT REPORT

CONTROL BLOCK: [ ] [ ] [ ] [ ] [ ] [ ] [ ] <sup>1</sup> (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0 1 | C | 0 | F | S | V | 1 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 1 | 1 | 2 | 0 | 4 | 5  
7 8 9                          14 15                          25 26                          57 CAT 58  
 LICENSEE CODE                          LICENSE NUMBER                          LICENSE TYPE                         

0 1 | L | 6 | 0 | 5 | 0 | 0 | 0 | 2 | 6 | 7 | 7 | 0 | 7 | 1 | 1 | 7 | 9 | 8 | 0 | 8 | 0 | 1 | 7 | 9 | 9  
60 81                          DOCKET NUMBER                          89                          EVENT DATE                          74 75                          REPORT DATE                          80  
 REPORT SOURCE                         

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES <sup>10</sup>

0 2 | During normal operation the weekly functional test of area radiation monitors re-  
 0 3 | quired by technical Specification SR 5.4.9 was not performed for one week. The test  
 0 4 | was performed without deficiencies the week before and the week after the week in  
 0 5 | which the test was not performed. There was no effect upon the health or safety of  
 0 6 | the public.

0 9 | Z | Z | 11 | A | 12 | X | 13 | Z | Z | Z | Z | Z | Z | 14 | Z | 15 | Z | 16  
9 10                          11                          12                          13                          18                          19                          20  
 SYSTEM CODE                          CAUSE CODE                          CAUSE SUBCODE                          COMPONENT CODE                          COMP. SUBCODE                          VALVE SUBCODE

17 | 7 | 9 | | | 0 | 1 | 9 | | | 0 | 3 | | | L | | | | 0 |  
21 22                          23                          24                          27                          28 29                          30                          31                          32  
 LEA/RO RF CRT NUMBER                          EVENT YEAR                          SEQUENTIAL REPORT NO.                          OCCURRENCE CODE                          REPORT TYPE                          REVISION NO.  
 X | 18 | Z | 19 | Z | 20 | Z | 21 | 0 | 0 | 0 | 0 | Y | 23 | N | 24 | Z | 25 | Z | 9 | 9 | 9 | 26  
33 34                          35                          36                          37                          40                          41                          42                          43                          44                          47  
 ACTION TAKEN                          FUTURE ACTION                          EFFECT ON PLANT                          SHUTDOWN METHOD                          HOURS                          ATTACHMENT SUBMITTED                          NPRO-4 FORM SUB.                          PRIME COMP. SUPPLIER                          COMPONENT MANUFACTURER

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS <sup>27</sup>

1 0 | A card file is used to schedule all surveillance tests. The card for this particular  
 1 1 | test was misfiled which resulted in the test not being scheduled for one week. The  
 1 2 | card file has been audited. Computer readout will be used as a cross check on the  
 1 3 | card system.

1 5 | Z | 28 | 0 | 0 | 2 | 29 | N/A | Z | 31 | Cross Checking Required Versus Received  
7 8 9                          10 11 12 13                          30                          32  
 FACILITY STATUS                          % POWER                          OTHER STATUS                          METHOD OF DISCOVERY                          DISCOVERY DESCRIPTION

1 6 | Z | 33 | Z | 34 | N/A | | | | | | | | N/A | | | | | |  
7 8 9                          10 11                          35                          36  
 ACTIVITY CONTENT RELEASED OF RELEASE                          AMOUNT OF ACTIVITY                          LOCATION OF RELEASE

1 7 | 0 | 0 | 0 | 37 | Z | 38 | N/A |  
7 8 9                          10 11 12                          39  
 PERSONNEL EXPOSURES NUMBER                          TYPE                          DESCRIPTION

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

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

2 0 | N | 44 | N/A |  
7 8 9                          10                          45  
 PUBLICITY ISSUED                          DESCRIPTION

7908070 688 S

NRC USE ONLY

REPORT DATE: August 1, 1979

REPORTABLE OCCURRENCE 79-19

OCCURRENCE DATE: July 11, 1979

ISSUE 0

Page 1 of 2

FORT ST. VRAIN NUCLEAR GENERATING STATION  
PUBLIC SERVICE COMPANY OF COLORADO  
P. O. BOX 361  
PLATTEVILLE, COLORADO 80651

REPORT NO. 50-267/79-19/03-L-0

Final

IDENTIFICATION OF  
OCCURRENCE:

On July 11, 1979, it was determined that a weekly surveillance test was not performed for one week. This occurrence has been identified as reportable in accordance with Section AC 7.5.b.3 of the Fort St. Vrain Technical Specifications.

EVENT  
DESCRIPTION:

Specification SR 5.4.9 requires a weekly functional test of the area radiation monitors.

Contrary to this requirement the test was not performed during the week of June 8, 1979, to June 15, 1979. The functional test was performed the week prior to and the week following that week and no deficiencies were found during either of those two tests.

CAUSE  
DESCRIPTION:

A card file system is used to schedule all surveillance tests. The card for this particular test was misfiled which resulted in the test not being issued for the one week.

CORRECTIVE  
ACTION:

The card file has been audited to verify that all tests will be scheduled as required. A computer readout will be used to provide a cross check on the card system.

539 347

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