

LICENSEE EVENT REPORT

8004290377

CONTROL BLOCK: _____

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

01	M	D	C	C	N	1	2	0	0	-	0	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4	5			
7	8	9				14	15							25	26								30	57			58			
			LICENSEE CODE					LICENSE NUMBER												LICENSE TYPE								CAT 58		

01	L	6	0	5	0	0	0	3	1	7	7	0	3	2	5	8	0	8	0	4	2	5	8	0	9							
7	8			60	61					68	69						74	75					80									
			REPORT SOURCE													DOCKET NUMBER							EVENT DATE						REPORT DATE			

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES

02 | During normal operation at 2130, #12 Control Room Air Conditioning Unit

03 | tripped. #11 Control Room Air Conditioning Unit remained in operation in

04 | accordance with T.S. 3.7.7.1.b. Unit 2 was at 100% power. #12 Control

05 | Room A/C Unit was returned to service at 0600 on 3/26/80. This is not

06 | a repetitive event.

07 | _____

08 | _____

09	S	G	11	E	12	F	13	V	A	L	V	E	X	14	D	15	H	16			
7	8		9	10	11	12	13	18	19	20				14	19	20					
			SYSTEM CODE		CAUSE CODE		CAUSE SUBCODE		COMPONENT CODE						COMP. SUBCODE		VALVE SUBCODE				
17	8	0	-	0	0	5	/	0	3	/	-	0									
			EVENT YEAR		SEQUENTIAL REPORT NO.			OCCURRENCE CODE		REPORT TYPE		REVISION NO.									
			A		Z		Z		0			0		0		0		R			
			ACTION TAKEN		FUTURE ACTION		EFFECT ON PLANT		SHUTDOWN METHOD		HOURS		ATTACHMENT SUBMITTED		NPRD-4 FORM SUB.		PRIME COMP. SUPPLIER		COMPONENT MANUFACTURER		
			18		19		20		21		22		23		24		25		26		
			CAUSE DESCRIPTION AND CORRECTIVE ACTIONS													27					

10 | The trip of #12 Control Room Air Conditioning was caused by a failure of the

11 | diaphragm on the unipressure valve. Manufacturer's representatives on-site

12 | said this was a normal end-of-life failure of this valve. The valve was

13 | replaced and the unit placed back in service.

14 | _____

15	C	0	1	0	28	29	NA	30	A	31	Operator Observation	32	
7	8	9	10	12	13		44	45	46			80	
			FACILITY STATUS		% POWER		OTHER STATUS		METHOD OF DISCOVERY				DISCOVERY DESCRIPTION
16	Z	Z	NA	35	33	34	NA	35	NA	35	35		
7	8	9	10	11			44	45			80		
			ACTIVITY RELEASED OF RELEASE			AMOUNT OF ACTIVITY						LOCATION OF RELEASE	
17	0	0	0	Z	37	38	NA	39					
7	8	9	11	12	13								
			PERSONNEL EXPOSURES			DESCRIPTION							
18	0	0	0	40	40	NA	41						
7	8	9	11	12									
			PERSONNEL INJURIES		DESCRIPTION								
19	Z	42	NA	43	42	43	43						
7	8	9	11	12									
			LOSS OF OR DAMAGE TO FACILITY		DESCRIPTION								
20	N	44	NA	45	44	45	45						
7	8	9	10										
			PUBLICITY ISSUED		DESCRIPTION								

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