

DUKE POWER COMPANY
POWER BUILDING
422 SOUTH CHURCH STREET, CHARLOTTE, N. C. 28201

A. C. THIES
SENIOR VICE PRESIDENT
PRODUCTION AND TRANSMISSION

P. O. Box 2178

March 26, 1975

Mr. Norman C. Moseley, Director
U. S. Nuclear Regulatory Commission
Suite 818
230 Peachtree Street, Northwest
Atlanta, Georgia 30303

Re: IE:II:TNE
50-269/75-1
50-270/75-1
50-287/75-1

Dear Mr. Moseley:

In reference to your letter which transmitted IE Inspection Report 50-269, -270 and -287/75-1, Duke Power Company does not consider information contained in this report to be proprietary.

Please find attached our responses to Items I.A.1, I.A.2, I.A.3, I.B.1, and I.B.3.

With regard to Section IV, Status of Previously Reported Unresolved items, the following is an updated status of selected items:

Oconee 2
74-7/4, "LPI Valve Failure"

Details I, paragraph 10 states that an interim measure is planned to remove the valve guide pins within one month. Due to extensive manpower requirements during recent outages, this schedule will not be met. Removal of the guide pins is currently scheduled to be completed by May 1, 1975.

Oconee 3
74-5/16, "Quality Assurance Records"

Due to delay in material delivery, the estimated completion date of April 1, 1975 should be changed to April 15, 1975.

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Oconee 1, 2, 3
74-10, 08, 11/9, "Unreviewed Safety Question"

With regard to responsibility for determining whether or not an item involves an unreviewed safety question, it is felt that the following is sufficient to resolve this item:

- (1) The Administrative Policy Manual for Nuclear Stations was revised on February 17, 1975 to specify the requirements for determining whether or not new procedures (which would include tests and experiments) involve an unreviewed safety question - see Sections 4.1.4.4(e), 4.2.4.4(f) and 4.3.4.4(f).
- (2) Item (8) of Figures 4.1-6, 4.2-13 and 4.3-12 of the APM specifies the requirement for determining whether or not a procedure revision involves an unreviewed safety question.
- (3) Sections 4.4.4.4.2 and 4.4.4.4.3, incorporated into the APM on December 20, 1974, specify the requirements for determining whether or not a modification involves an unreviewed safety question.

Section V of the inspection report states the licensee failed to meet written commitment dates for corrective action required to resolve problems with various effluent radiation monitors. The dates referred to were target dates provided in my letter dated September 9, 1974, for resolution of these problems. Additional information was provided concerning these monitors in my letter dated February 14, 1975. The current status of actions taken to resolve the problems is detailed below:

(a) Liquid Waste Process Monitors RIA-33 and -34

The liquid waste process monitors RIA-33 and -34 have been moved to the turbine floor to a high point in the discharge line. Dual chambers have been installed so that one can be decontaminated while the other is in use. However, problems with contamination of these monitors persists and additional investigation is required.

(b) Waste Gas Process Monitors RIA-37 and -38

My letter of September 9, 1974 stated that a collimator would be installed in the waste gas process monitors RIA-37 and -38 and the target date for completion was November 15, 1974. It was reported in my letter dated February 14, 1975 that stainless steel collimators had been installed and tested prior to November 15, 1974. However,

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test results showed that the collimator did not solve the problem. At present, we are investigating the possible effects of using longer holdup times for gaseous wastes.

(c) Iodine Monitors RIA-44 and -48

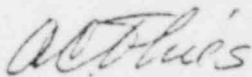
My letter of September 9, 1974 stated that the prefilters for iodine monitors RIA-44 and -48 would be relocated upstream from the detector to reduce background radiation. As stated in my letter of February 14, 1975, it is anticipated that the prefilters will be relocated prior to April 1, 1975.

(d) Particulate Monitors RIA-43 and -47

The Unit 1 particulate monitors RIA-43 and -47 have been modified to provide better correlation between the monitors and grab samples. Data concerning the effectiveness of the modification are presently being collected and evaluated. It is anticipated that data collection will be completed by April 1, 1975, and the evaluation of the effectiveness of this modification will be completed by mid-April.

Resolution of the problems associated with these radiation monitors continues to receive high-level management attention. We have formed a working group of radiation monitoring and engineering specialists from Oconee, the Steam Production Department and the Design Engineering Department to actively pursue resolution of these problems. Significant progress has been made in identifying the causes, and work will continue to expeditiously resolve the engineering problems associated with the monitors. In the meanwhile, appropriate monitoring will continue to assure effluent releases are maintained within station limits and guidelines. We will advise you of our progress by providing you another status report by May 1, 1975.

Very truly yours,



A. C. Thies

ACT:vr
Attachment

D U K E P O W E R C O M P A N Y

O C O N E E N U C L E A R S T A T I O N

R E S P O N S E S T O I T E M S

I . A . 1 , I . A . 2 , I . A . 3 , I . B . 1 , I . B . 3

O F I N S P E C T I O N R E P O R T 5 0 - 2 6 9 / 7 5 - 1 , 5 0 - 2 7 0 / 7 5 - 1 , 5 0 - 2 8 7 / 7 5 - 1

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I.A.1

Contrary to Technical Specification 6.4.1.e, repair and testing was performed on Type A electrical containment penetration in Unit 3 on December 30, 1974, without an approved procedure.

RESPONSE:

The containment penetration was determined to be leaking during performance of a local leak detection test. It was the understanding of the performance engineer that the SF₆ gas in the penetration cannister was only for the purpose of acting as a quenching agent for spark suppression. Therefore, no requirements for periodic surveillance or minimum pressure were specified, other than the manufacturer's recommendations. For this reason, the implications of this leak and the scope of maintenance activity required to repair the leak were not realized. It was not considered as an item which could affect nuclear safety or radiation exposure to personnel; hence, the appropriate administrative controls were not utilized.

In order to prevent recurrence of this type of infraction, all performance group personnel have reviewed this incident and are familiar with the necessity for following appropriate procedures and instructions. In addition, the Administrative Policy Manual for Nuclear Stations and Station Administrative Procedures have been reviewed to ensure understanding.

A periodic test is being prepared to address survey of the SF₆ pressure in all electrical penetrations. The electrical penetration has been repaired and is currently holding SF₆ pressure; thus, containment integrity is being maintained. A spare Type A electrical penetration has been repaired and tested and will be installed at the first available outage, which is estimated to be the end of April, 1975.

I.A.2

Contrary to Criterion V of 10 CFR 50 Appendix B, a number of deficiencies were observed in implementation of the controlling procedures contained in Duke Power Company, Steam Production Department Administrative Policy Manual for Nuclear Plants (APM), Quality Assurance Department, Quality Assurance Manual (QAM), and Oconee Nuclear Station Administrative Procedure No. 9, Equipment Removal and Restoration.

RESPONSE:

The existing controls of maintenance activities have been examined and have been determined to be adequate; however, since they involve interface between the Operations and Maintenance Groups, some degree of coordination was required to assure proper implementation. In order to provide better

controls over these activities, several definitive steps have been taken to more clearly specify the group responsibilities associated with the various aspects of a maintenance function. These steps are described below:

- (a) Administrative Procedure 9 was revised on February 15, 1975. This clearly specifies that the removal and restoration of equipment is to be an Operations Group responsibility. This will facilitate the necessary awareness of station conditions by the Operations Group through the use of an out-of-normal log.
- (b) To assure that Work Requests are properly handled, Maintenance Directive 8 was issued on February 25, 1975. This directive specifies use of a revised work request form which deals only with maintenance activities. The Planning Engineer has conducted training sessions with all station groups stressing the proper utilization of the form and the new program. The Planning Section is also performing an audit on completed work requests to assure complete sign off before they are filed.
- (c) All maintenance and instrument procedures are being reviewed and updated to include provisions for documenting that the station unit status is as required to perform the specified maintenance. This will be completed by June 1, 1975.

I.A.3

Contrary to Technical Specification 4.0.2, several Oconee 3 annual surveillance items have exceeded the 18 month limit.

RESPONSE:

With regard to the initial performance of surveillance items for which a frequency is given in the Technical Specifications, it was Duke Power Company's previous understanding from the Nuclear Regulatory Commission that the beginning date for the interval specified is the date of issuance of the Facility Operating License for a unit. Therefore, a surveillance specified to be performed annually for a particular unit could be performed in accordance with the Technical Specifications, up to 18 months following issuance of the Facility Operating License for that unit. In the case of Oconee 2, all required surveillance has been performed within 18 months of the issuance of the license for the unit.

The above described position has been communicated to the Division of Reactor Licensing of the Nuclear Regulatory Commission, and a response requested if this application of the Oconee Technical Specifications is not correct.

I.B.1

Contrary to Technical Specification 6.5.2.h, records of recalibration of the flux/flow/imbalance trip setpoints could not be produced by the licensee.

RESPONSE:

The instrument procedure for flux/flow/imbalance trip setting had been performed and the data recorded. Subsequently, the data sheet was misplaced and could not be produced for the inspector. To prevent future incidents, the procedure has been revised to include the data sheet as an integral part of the procedure. These data sheets will be retained as required by Technical Specification 6.5.2.h. Also, the flux/flow/imbalance test has been performed since the deficiency was identified and the settings were recorded on the data sheet and filed with the procedure.

I.B.3

Contrary to 10 CFR 20.401, the licensee's fourth quarter, 1974, personnel exposure records were not accurate, in that a determined correction factor was not uniformly applied.

RESPONSE:

The doses to the two individuals of concern were reduced after proof of lower exposure was provided by the TLD contractor. These individuals were the only ones that previously had appeared to have exceeded the 10 CFR 20 quarterly limits. The previously recorded exposure data for other personnel was not similarly lowered as this was the most accurate, conservative data available. This practice of correcting the exposure records for two out of a large group of records does not appear to be inconsistent with the requirements of 10 CFR 401.

Duke Power Company

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2/24/75

Ltr to Duke Power Company fm N. C. Moseley dtd:

IE Inspection Report Nos. 50-269/75-1, 50-270/75-1 and 50-287/75-1

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