

LICENSEE EVENT REPORT

EXHIBIT A

CONTROL BLOCK: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] (1) (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

[0] [1] [0] [R] [T] [N] [P] [1] [2] [0] [0] [0] [0] [0] [0] [0] [0] [0] [0] [0] [0] [0] [0] [3] [4] [1] [1] [1] [1] [4] [ ] [ ] [5]

CONT [0] [1] REPORT SOURCE [L] [6] [0] [5] [0] [0] [0] [3] [4] [4] [7] [0] [4] [1] [1] [8] [0] [8] [0] [8] [2] [9] [8] [0] [9]

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10) [0] [2] NO. 80-05; DURING PERIODIC SURVEILLANCE TESTING AND DURING STARTUP [0] [3] PHYSICS TESTING, VARIOUS MAIN STEAM ISOLATION VALVES DID NOT GO FULLY [0] [4] CLOSED AS REQUIRED. THIS HAD NO EFFECT ON SAFETY SINCE NO STEAM FLOW WAS [0] [5] PRESENT IN THE VALVES DURING THESE OCCURRENCES AND THE VALVES ARE DESIGNED [0] [6] TO GO SHUT WHEN THERE IS STEAM FLOW. [0] [7] [0] [8]

[0] [9] SYSTEM CODE [C] [D] [11] CAUSE CODE [E] [12] CAUSE SUBCODE [B] [13] COMPONENT CODE [V] [A] [L] [V] [E] [X] [14] COMP SUBCODE [E] [15] VALVE SUBCODE [D] [16] LER/RO REPORT NUMBER [17] EVENT YEAR [8] [0] [ ] [ ] SEQUENTIAL REPORT NO. [0] [0] [5] [ ] OCCURRENCE CODE [ ] [ ] [ ] REPORT TYPE [T] [ ] REVISION NO. [ ] [ ] ACTION TAKEN [D] [ ] FUTURE ACTION [X] [ ] EFFECT ON PLANT [Z] [ ] SHUTDOWN METHOD [Z] [ ] HOURS [0] [0] [0] [0] ATTACHMENT SUBMITTED [Y] [ ] NPRD-4 FORM SUB. [Y] [ ] PRIME COMP SUPPLIER [A] [ ] COMPONENT MANUFACTURER [A] [5] [8] [5] [26]

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27) [1] [0] THE CAUSE OF THIS OCCURENCE IS COMPONENT FAILURE. IMMEDIATE CORRECTIVE [1] [1] ACTION WAS TO FREE UP THE STEMS AND CYCLE THE VALVES. PERMANENT CORRECTIVE [1] [2] ACTION IS STILL UNDER INVESTIGATION. [1] [3] [1] [4]

[1] [5] FACILITY STATUS [X] [28] % POWER [1] [0] [0] [29] OTHER STATUS [V] [A] [R] [I] [O] [U] [S] [30] METHOD OF DISCOVERY [A] [31] DISCOVERY DESCRIPTION [O] [P] [E] [R] [A] [T] [O] [R] [O] [B] [S] [E] [R] [V] [A] [T] [I] [O] [N] [32]

[1] [6] ACTIVITY CONTENT [Z] [33] AMOUNT OF ACTIVITY [N] [A] [35] LOCATION OF RELEASE [N] [A] [36] PERSONNEL EXPOSURES NUMBER [0] [0] [0] [0] [37] TYPE [Z] [38] DESCRIPTION [N] [A] [39]

[1] [7] PERSONNEL INJURIES NUMBER [0] [0] [0] [0] [40] DESCRIPTION [N] [A] [41] LOSS OF OR DAMAGE TO FACILITY TYPE [ ] [ ] [42] DESCRIPTION [N] [A] [43] PUBL CITY [ ] [ ] [44] DESCRIPTION [N] [A] [45]

NAME OF PREPARER John C. Perry PHONE 503/556-3713, ext. 228

3009260510