

LICENSEE EVENT REPORT

CONTROL BLOCK

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0 1 A L B R F 2 2 0 0 - 0 0 0 0 0 0 - 0 0 3 4 1 1 1 1 4 5
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

CONT

0 1 L 6 0 5 0 0 0 2 6 0 7 0 3 1 1 8 1 8 0 4 0 1 8 1 9
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 During normal operation during the performance of SI 4.5.A.1.d, CS system I flow
0 3 indicator 2-FI-75-21 failed to indicate flow. CS system I was declared inoperable
0 4 at 1920. Redundant systems were operable. There was no effect on the health or
0 5 safety of the public. Previous event: none
0 6
0 7
0 8

0 9 S F 11 E 12 E 13 I N S T R U 14 I 15 Z 16
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

17 LER/RO REPORT NUMBER 8 1 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

ACTION TAKEN C 18 Z 19 EFFECT ON PLANT Z 20 SHUTDOWN METHOD Z 21 HOURS 0 0 0 0 22 ATTACHMENT SUBMITTED Y 23 NPD-4 FORM 508 N 24 PRIME COMP. SUPPLIER L 25 COMPONENT MANUFACTURER G 0 8 0 0 26

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 The model 555111BDA3AAA transmitter had failed which resulted in no flow indication.
1 1 The required SI's were performed. The transmitter was replaced, required testing
1 2 was performed, and the CS system I declared operable at 1335 on 3/12/81. Failure
1 3 is random and no recurrence control action is planned.
1 4

1 5 FACILITY STATUS E 29 1 0 0 29 NA 30 METHOD OF DISCOVERY B 31 Surveillance testing 32
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

1 6 ACTIVITY CONTENT Z 33 Z 34 NA 35 LOCATION OF RELEASE NA 36
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

1 7 PERSONNEL EXPOSURES NUMBER 0 0 0 37 TYPE Z 38 DESCRIPTION NA 39
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

1 8 PERSONNEL INJURIES NUMBER 0 0 0 40 DESCRIPTION NA 41
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

1 9 LOSS OF OR DAMAGE TO FACILITY TYPE Z 42 DESCRIPTION NA 43
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

2 0 PUBLICITY ISSUED N 44 DESCRIPTION NA 45
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

NAME OF PREPARER

PHONE

NRC USE ONLY

8104060 717

LER SUPPLEMENTAL INFORMATION

Event Number: 260 / 8111 Technical Specification involved 3.5.A.2

Reported Under Technical Specification 6.7.2.b(2)

Date of Occurrence 3/11/81 Time of Occurrence 1920 Unit 2

Location and Description of Occurrence:

CS System I flow indicator 2-FI-75-21 failed to indicate flow during surveillance testing.

Conditions Prior to Occurrence:

Unit 1 at 98% power

Unit 2 at 100% power.

Unit 3 at 99% power.

Action specified in the Technical Specification Surveillance Requirements met for inoperable equipment. Describe.

Required surveillance testing performed.

Transmitter failed.

Impact of Occurrence:

There was no danger to the health or safety of the public, no release of activity, no damage to plant or equipment and no resulting significant chain of events.

Corrective Action:

Replaced the transmitter. No recurrence control action planned.

Final Data:

None

*Retention: Period - Lifetime; Responsibility - Administrative Supervisor

REVIEWED BY

