

LICENSEE EVENT REPORT

CONTROL BLOCK: _____ (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

01	P	A	B	V	S	L	0	0	-	0	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4	5
LICENSEE CODE							LICENSE NUMBER										LICENSE TYPE JO					57 CAT 58				

01	L	0	5	0	0	0	3	3	4	7	0	5	1	1	8	1	8	0	6	1	6	8	1	9
REPORT SOURCE		DOCKET: JM3GR								EVENT DATE						REPORT DATE								

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 On 5/11/81 with the plant at 100% power, the initial drip rate required prior to

03 performance of a maintenance surveillance test could not be met on any of the

04 control room chlorine detectors. There were no safety hazards to the operators

05 because the control room ventilation was put on full recirculation, as per

06 Technical Specification 3.3.3.7. There have been twenty failures, to date, of the

07 chlorine detection system.

09	S	G	11	B	12	B	13	I	N	S	T	R	U	14	E	15	Z	16					
SYSTEM CODES			CAUSE CODE		CAUSE SUBCODE		COMPONENT CODE						COMP. SUBCODE		VALVE SUBCODE								
17	8	1	0	5	0	0	3	0	3	L	0	0	0	0	0	0	0						
LER/RO REPORT NUMBER		EVENT YEAR		SEQUENTIAL REPORT NO.			OCCURRENCE CODE		REPORT TYPE		REVISION NO.												
18	A	18	F	19	Z	20	Z	21	0	0	0	0	Y	23	N	24	A	25	W	0	2	5	26
ACTION TAKEN		EFFECT ON PLANT		SHUTDOWN METHOD		HOURS		ATTACHMENT SUBMITTED		NPRO-4 FORM SUB.		PRIME COMP. SUPPLIER		COMPONENT MANUFACTURER									

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

10 The cause of the failures is thought to be an improper method of venting the

11 electrolyte reservoir and clogging of the glass orifice by minute wick particles

12 clinging to the electrolyte. Design changes have been made since this incident and

13 should correct the problem.

15	E	28	1	0	0	29	N/A	30	B	31	Performing routine surveillance	32		
FACILITY STATUS		% POWER			OTHER STATUS			METHOD OF DISCOVERY					DISCOVERY DESCRIPTION	
16	Z	33	Z	34	N/A	35	N/A	36	N/A	36	N/A			
ACTIVITY CONTENT		AMOUNT OF ACTIVITY					LOCATION OF RELEASE							
17	0	0	0	37	Z	38	N/A	39						
PERSONNEL EXPOSURES		TYPE		DESCRIPTION										
18	0	0	0	40	N/A	41	N/A	42						
PERSONNEL INJURIES		DESCRIPTION												
19	Z	42	N/A	43	N/A	44	N/A	45						
LOSS OF OR DAMAGE TO FACILITY		DESCRIPTION												
20	N	44	N/A	45	N/A	46	N/A	47						
PUBLICITY ISSUED		DESCRIPTION												

Attachment To LER 81-50/03L
Beaver Valley Power Station
Duquesne Light Company
Docket No. 50-334

No further information is available or needed to satisfy the reporting requirement.