

LICENSEE EVENT REPORT

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

01 | C | O | F | S | V | 1 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 1 | 1 | 2 | 0 | 4 | _____ | 5
7 8 9 14 15 25 26 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50

CON'T
01 | REPORT SOURCE | 1 | 6 | 0 | 15 | 10 | 10 | 10 | 12 | 16 | 17 | 7 | 0 | 1 | 1 | 5 | 8 | 1 | 1 | 8 | 0 | 1 | 1 | 3 | 8 | 1 | 3
7 8 60 61 68 69 74 75 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 | During a maintenance shutdown period, operations personnel chlorinated the circu-
03 | lating water system and collected the plant liquid effluent sample as required. The
04 | sample indicated that the residual chlorine was in excess of the LCO NR 1.1 limit.
05 | This is reportable per Fort St. Vrain Technical Specification AC 7.5.2(b)2. No af-
06 | fect on public health or safety. No accompanying occurrence.
07 | _____
08 | _____

09 | SYSTEM CODE | CAUSE CODE | CAUSE SUBCODE | COMPONENT CODE | COMP SUBCODE | VALVE SUBCODE
H | F | 11 | X | 12 | Z | 13 | Z | Z | Z | Z | Z | Z | 14 | Z | 15 | Z | 16
9 10 11 12 13 18 19 20
17 | LEP/RO REPORT NUMBER | EVENT YEAR | SEQUENTIAL REPORT NO. | OCCURRENCE CODE | REPORT TYPE | REVISION NO.
8 | 1 | 21 | 22 | 0 | 0 | 4 | 23 | 24 | 26 | 27 | 28 | 29 | L | 30 | 31 | 32 | 0 | 33
33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50
ACTION TAKEN | FUTURE ACTION | EFFECT ON PLANT | SHUTDOWN METHOD | HOURS | ATTACHMENT SUBMITTED | NPD-4 FORM SUB. | PRIME COMP. SUPPLIER | COMPONENT MANUFACTURER
7 | 18 | 7 | 19 | Z | 20 | Z | 21 | 0 | 0 | 0 | 0 | 27 | Y | 23 | N | 24 | Z | 25 | Z | 9 | 9 | 9 | 9 | 26
33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

10 | Chlorine consumption in the circulating water system is a complex process dependent
11 | upon several variables. After the high residual chlorine level in the plant liquid
12 | effluent, the plant chemist checked the chlorination system and could not identify
13 | any cause for the high chlorine level. Subsequent chlorination and samples did not
14 | reveal a recurrence of the high chlorine level.
15 | _____

15 | FACILITY STATUS | % POWER | OTHER STATUS | METHOD OF DISCOVERY | DISCOVERY DESCRIPTION
G | 28 | 0 | 0 | 0 | 29 | N/A | 30 | A | 31 | Operator Observation | 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

16 | ACTIVITY RELEASED | CONTENT OF RELEASE | AMOUNT OF ACTIVITY | LOCATION OF RELEASE
Z | 33 | Z | 34 | N/A | 35 | N/A | 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

17 | PERSONNEL EXPOSURES | NUMBER | TYPE | DESCRIPTION
0 | 0 | 0 | 37 | Z | 38 | N/A | 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

18 | PERSONNEL INJURIES | NUMBER | DESCRIPTION
0 | 0 | 0 | 40 | N/A | 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

19 | LOSS OF OR DAMAGE TO FACILITY | TYPE | DESCRIPTION
Z | 42 | N/A | 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

20 | PUBLICITY ISSUED | DESCRIPTION
N | 44 | N/A | 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

8102230 660

NAME OF PREPARER *M.J. Davis for J.W. Gahm*

PHONE: (303) 785-2224

NRC USE ONLY

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