

LICENSEE EVENT REPORT

CONTROL BLOCK: _____ ①

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

01 | I | L | Z | I | S | 1 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 1 | 1 | 1 | 1 | 4 | 5
7 8 9 LICENSEE CODE 14 15 LICENSE NUMBER 25 26 LICENSE TYPE 30 31 CAT 58

CON'T
01 | L | 6 | 0 | 5 | 0 | 0 | 0 | 2 | 9 | 5 | 7 | 0 | 2 | 0 | 4 | 8 | 1 | 8 | 0 | 3 | 0 | 5 | 8 | 1 | 9
7 8 REPORT SOURCE 60 61 DOCKET NUMBER 62 63 EVENT DATE 74 75 REPORT DATE 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES ⑩

02 | During normal operation with Unit 2 at 93% power and Unit 1 in cold shut-
03 | down, the shift engineer discovered that the 2 hydrogen recombiners were
04 | not interchangeable as implied in the FSAR, Section 6.8. The Unit 2 re-
05 | combiner was proven operable as required by Tech Spec. 4.8.B.2. The
06 | health and safety of the public was not affected. There was no redundant
07 | equipment for either unit.

08 | _____ 80

09 | S | E | 11 | B | 12 | A | 13 | R | E | C | O | M | B | 14 | Z | 15 | Z | 16
7 8 SYSTEM CODE 9 10 CAUSE CODE 11 12 CAUSE SUBCODE 13 14 COMPONENT CODE 15 16 COMP. SUBCODE 17 18 VALVE SUBCODE

17 | LER/RO REPORT NUMBER | 8 | 1 | 0 | 0 | 5 | 0 | 3 | L | 0
21 22 23 24 25 26 27 28 29 30 31 32
EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVISION NO.

18 | F | 19 | Z | 20 | Z | 21 | 0 | 0 | 0 | 0 | N | 23 | Y | 24 | A | 25 | A | 5 | 8 | 0 | 26
33 34 35 36 37 38 39 40 41 42 43 44 45 46 47
ACTION TAKEN: FUTURE ACTION: EFFECT ON PLANT: SHUTDOWN METHOD: HOURS: ATTACHMENT SUBMITTED: NPD-4 FORM SUB.: PRIME COMP. SUPPLIER: COMPONENT MANUFACTURER:

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS ⑰

10 | Cause was a 3 inch to a 4 inch reducer that was welded on the discharge
11 | piping of the Unit 2 recombiner. This reducer made the 2 recombiners not
12 | identical, therefore not interchangeable as originally designed. Spool
13 | piece was made up to make the U1 recombiner interchangeable, Spool piece
14 | for U2 will be made prior to U1 startup. AIR 7-81 is tracking this.

15 | A | 28 | 0 | 0 | 0 | 29 | NA | B | 31 | Operator Observation
7 8 9 FACILITY STATUS 10 11 % POWER 12 13 OTHER STATUS 30 31 METHOD OF DISCOVERY 32 33 DISCOVERY DESCRIPTION

16 | Z | 33 | Z | 34 | NA | NA | 36
7 8 9 ACTIVITY CONTENT 10 11 AMOUNT OF ACTIVITY 35 36 LOCATION OF RELEASE

17 | 0 | 0 | 0 | 37 | Z | 38 | NA | 39
7 8 9 PERSONNEL EXPOSURES NUMBER 10 11 TYPE 12 13 DESCRIPTION 39

18 | 0 | 0 | 0 | 40 | NA | 41
7 8 9 PERSONNEL INJURIES NUMBER 10 11 DESCRIPTION 41

19 | Z | 42 | NA | 43
7 8 9 LOSS OF OR DAMAGE TO FACILITY TYPE 10 11 DESCRIPTION 43

20 | Z | 44 | NA | 45
7 8 9 PUBLICITY ISSUED 10 11 DESCRIPTION 45

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