

LICENSEE EVENT REPORT

CONTROL BLOCK: _____ (1)

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0 1 | M A Y K R 1 | 2 | 0 0 0 - 0 0 0 0 0 0 0 0 - 0 0 0 | 3 | 4 1 1 1 1 1 1 | 4 | _____ | 5
7 8 9 | LICENSEE CODE | 14 15 | LICENSE NUMBER | 25 26 | LICENSE TYPE | 30 | CAT 58 | 58

CON'T
0 1 | L | 6 | 0 5 0 0 0 0 0 2 9 | 7 | 0 6 1 1 6 8 1 1 | 8 | 0 7 1 1 6 8 1 1 | 9
7 8 | REPORT SOURCE | 60 61 | DOCKET NUMBER | 68 69 | EVENT DATE | 74 75 | REPORT DATE | 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)
0 2 | During a refueling outage in mode 6 while performing a type B test on el
0 3 | lectrical penetration Blister 11E the O ring seals on penetrations No. 7,
0 4 | 8, 10, 11 and 15 failed to hold pressure. Due to this leakage the combi
0 5 | ned leakage rate for all penetrations exceeded the T.S.3.6.1.2b limit. T
0 6 | his is the first event of this nature. The public health and safety was
0 7 | not adversely affected by this event.

0 8 | _____ | 80
0 9 | SYSTEM CODE | 9 10 | CAUSE CODE | 11 12 | CAUSE SUBCODE | 13 14 | COMPONENT CODE | 15 16 | COMP. SUBCODE | 17 18 | VALVE SUBCODE | 19 20
S A (11) E (12) B (13) P E N E T R (14) D (15) Z (16)

17 | LER/RO REPORT NUMBER | 21 22 | EVENT YEAR | 23 | SEQUENTIAL REPORT NO. | 24 25 26 | OCCURRENCE CODE | 27 28 | REPORT TYPE | 29 30 | REVISION NO. | 31 32
8 1 | - | 0 1 3 | / | 0 3 | - | 0
18 | ACTION TAKEN | 33 | FUTURE ACTION | 34 | EFFECT ON PLANT | 35 | SHUTDOWN METHOD | 36 | HOURS | 37 38 39 | ATTACHMENT SUBMITTED | 40 | NPRD-4 FORM SUB. | 41 | PRIME COMP. SUPPLIER | 42 | COMPONENT MANUFACTURER | 43 44 45 | 46 47
B (18) G (19) Z (20) Z (21) 0 0 0 0 (22) N (23) N (24) N (25) C 3 1 0 (26)

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)
1 0 | The root cause of this event was loose bolting on the penetration flange
1 1 | s. The penetrations were manufactured by Chicago Bridge and Iron Co. No.
1 2 | EC-2-T. The bolts were retightened and penetrations successfully retest
1 3 | ed. The penetrations will be tested on an annual basis until two success
1 4 | ful tests have been completed.

1 5 | FACILITY STATUS | 7 8 9 | % POWER | 10 11 12 13 | OTHER STATUS | 14 15 | METHOD OF DISCOVERY | 16 17 | DISCOVERY DESCRIPTION | 18 19 20
H (28) 0 0 0 0 (29) NA (30) B (31) Type "B" Test (32)

1 6 | ACTIVITY CONTAINED | 7 8 9 | RELEASED OF RELEASE | 10 11 | AMOUNT OF ACTIVITY | 12 13 | LOCATION OF RELEASE | 14 15 16
Z (33) Z (34) NA (35) NA (36)

1 7 | PERSONNEL EXPOSURES | 7 8 9 | NUMBER | 10 11 | TYPE | 12 | DESCRIPTION | 13 14 15
0 0 0 (37) Z (38) NA (39)

1 8 | PERSONNEL INJURIES | 7 8 9 | NUMBER | 10 11 | DESCRIPTION | 12 13 14
0 0 0 (40) NA (41)

1 9 | LOSS OF OR DAMAGE TO FACILITY | 7 8 9 | TYPE | 10 | DESCRIPTION | 11 12 13 14 15
Z (42) NA (43)

2 0 | PUBLICITY ISSUED | 7 8 9 | DESCRIPTION | 10 11 12 13 14 15 16
N (44) NA (45)

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