

LICENSEE EVENT REPORT

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

1 I L D R S 2 0 0 0 - 0 0 0 0 0 0 - 0 0 0 4 1 1 1 1 4 5
8 9 LICENSEE CODE 14 15 LICENSE NUMBER 25 26 LICENSE TYPE 30 37 CAT 58

1 L 6 0 5 0 0 0 2 3 7 7 0 6 2 4 8 1 8 0 7 2 1 8 1 9
8 REPORT SOURCE 60 61 DOCKET NUMBER 68 69 EVENT DATE 74 75 REPORT DATE 80

2 While performing DIS 500-7, pressure switch PS 504C was found to trip at 402 PSIG
3 exceeding T.S. Table 3.1.1 limits of 400 PSIG. Safety significance was minimized be-
4 cause of three remaining switches were all operable and would have performed the
5 necessary trip at 400 PSIG. There were no effects upon the health or safety of the
6 public. Previous occurrences; D-12-77-25/03L-0 and 79-68/03L-0 Docket 50-237.

9 SYSTEM CODE I A 11 CAUSE CODE E 12 CAUSE SUBCODE B 13 COMPONENT CODE I N S T R U 14 COMP. SUBCODE S 15 VALVE SUBCODE Z 16
17 LER/RO REPORT NUMBER 8 1 22 SHUTDOWN METHOD Z 21 HOURS 0 0 0 0 22 ATTACHMENT SUBMITTED N 23 NPRD-4 FORM SUB. Y 24 PRIME COMP. SUPPLIER N 25 COMPONENT MANUFACTURER 8 0 6 9 26
33 ACTION TAKEN E 18 34 FUTURE ACTION Z 19 35 EFFECT ON PLANT Z 20 36 SHUTDOWN METHOD Z 21 37 HOURS 0 0 0 0 40 41 ATTACHMENT SUBMITTED N 23 42 NPRD-4 FORM SUB. Y 24 43 PRIME COMP. SUPPLIER N 25 44 COMPONENT MANUFACTURER 8 0 6 9 47

10 The cause of this event was attributable to instrument setpoint drift. The instrument
11 was inspected for abnormalities to its internal mechanisms. Nothing abnormal was found
12 The switch was reset to its correct setpoint and then checked for repeatability three
13 times. DIS 500-7 will continue to be performed monthly.

5 FACILITY STATUS E 28 10 % POWER 0 9 6 29 11 OTHER STATUS N/A 30 METHOD OF DISCOVERY B 31 12 DISCOVERY DESCRIPTION Surveillance testing 32

6 33 ACTIVITY CONTENT Z 34 34 AMOUNT OF ACTIVITY N/A 35 36 LOCATION OF RELEASE N/A 36

7 37 PERSONNEL EXPOSURES NUMBER 0 0 0 37 38 TYPE Z 38 39 DESCRIPTION N/A 39

8 40 PERSONNEL INJURIES NUMBER 0 0 0 40 41 DESCRIPTION N/A 41

9 42 LOSS OF OR DAMAGE TO FACILITY TYPE Z 42 43 DESCRIPTION N/A 43

10 44 PUBLICITY ISSUED N 44 45 DESCRIPTION N/A 45 8107300076 810721 PDR ADOCK 05000237 S PDR NRC USE ONLY

NAME OF PREPARER Wayne Morgan PHONE: 815-942- 920 Ext. 422



Commonwealth Edison

DEVIATION REPORT

DVR NO.	STA	UNIT	YEAR	NO.
D-12	- 2	- 81	- 68	

PART 1 TITLE OF DEVIATION: D2 Turbine First Stage Pressure 45% Scram bypass P.S.-504C

SYSTEM AFFECTED: 500 Rx Protection System

PLANT CONDITIONS: MODE Run PWR(MWT) 2440 LOAD(MWE) 779

DATE: 6/24/81 TIME: 0915

TESTING: YES NO

DESCRIPTION OF EVENT: While conducting routine surveillance DIS 500-7, it was discovered that PS-504C Trip Setpoint had drifted to 402 PSIG. Tech Spec Limit is less than or equal to 400 PSIG.

DESCRIPTION OF CAUSE: High frequency vibration may be the cause.

OTHER APPLICABLE INFORMATION: Reset PS-504C set point to within Tech. Spec. Limits. Instrument response verified three times.

EQUIPMENT FAILURE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	DR NO.	WR NO.	Donald C. Riersen	6/24/81
		N/A	N/A	RESPONSIBLE SUPERVISOR	DATE

PART 2 OPERATING ENGINEERS COMMENTS: Redundant instrumentation was operable and would have performed the intended safety function.

TYPE OF DEVIATION REPORTABLE OCCURRENCE	EVENT OF POTENTIAL PUBLIC INTEREST	TECH SPEC VIOLATION	NON-REPORTABLE OCCURRENCE	ANNUAL REPORTING	SAFETY-RELATED WR ISSUED
<input type="checkbox"/> 14 DAY <input type="checkbox"/> 10CFR21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> 30 DAY NOTIFICATION 6.6.B.2.a					

REPORTABLE OCCURRENCE NUMBER	ACTION ITEM NO.	PROMPT ON-SITE NOTIFICATION
XXX 81-39/03L-0		R. M. Ragan 6/26/81
		TITLE _____ DATE _____ TIME _____
		TITLE _____ DATE _____ TIME _____

24-HOUR NRC NOTIFICATION (Courtesy)	PROMPT OFF-SITE NOTIFICATION
<input checked="" type="checkbox"/> TPH Mike Jordan 6/24/81 1400 hrs	F. A. Palmer 6/26/81 3:56
REGION III DATE TIME	TITLE DATE TIME
<input type="checkbox"/> TGM REGION I & DOL DATE TIME	TITLE DATE TIME

RESPONSIBLE COMPANY OFFICER INFORMED OF 10CFR21 CONDITIONS AND THEIR REPORT TO NRC

REVIEW AND COMPLETED: John Wujciga 6/26/81
OPERATING ENGINEER DATE

ACCEPTANCE BY STATION REVIEW AS REQUIRED: 7/22/81

DATE: 7/21/81

RESOLUTION APPROVED AND AUTHORIZED FOR DISTRIBUTION: Douglas Hoover 7/22/81
STATION SUPERINTENDENT DATE