

LICENSEE EVENT REPORT

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

1 | G | A | E | I | H | 1 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 2 | 1 | 1 | 1 | 1 | 4 | _____ | 5
 6 5 LICENSEE CODE 14 15 LICENSE NUMBER 25 26 LICENSE TYPE 30 31 CAT 58

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

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)
 2 | On 9-14-81, with Hatch 1 at steady state 99% thermal power following completion of the "HPCI Pump Rated Flow" test it was discovered that an oil
 3 | leak developed on the oil system. This is reportable under Tech Spec
 4 | Section 6.1.9.1.b. As per Tech Spec 3.5.D.2, RCIC, ADS, CSS, LPCI were
 5 | operable and no significant event occurred. This is a repetitive occurrence (Ref: 50-321/1981-088). There were no effects upon public
 6 | health and safety due to this event.

9 | S | F | 11 | E | 12 | B | 13 | V | A | L | V | E | X | 14 | D | 15 | D | 16
 9 10 SYSTEM CODE 11 12 CAUSE CODE 13 14 CAUSE SUBCODE 15 16 COMPONENT CODE 17 18 COMP SUBCODE 19 20 VALVE SUBCODE
 17 | 8 | 1 | 1 | 0 | 2 | 0 | 3 | 1 | 0 | 0 | 0 | 0 | Y | Y | N | R | 2 | 9 | 0 | 26
 21 22 LEAD REPORT NUMBER 23 24 EVENT YEAR 25 26 SEQUENTIAL REPORT NO. 27 28 OCCURRENCE CODE 29 30 REPORT TYPE 31 32 REVISION NO.
 33 34 ACTION TAKEN 35 36 FUTURE ACTION 37 38 EFFECT ON PLANT 39 40 SHUTDOWN METHOD 41 42 HOURS 43 44 ATTACHMENT SUBMITTED 45 46 NFRD-4 FORM SUB 47 48 PRIME COMP SUPPLIER 49 50 COMPONENT MANUFACTURER

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)
 5 | The oil leak was due to a torn diaphragm on the HPCI Robt. Shaw control
 6 | valve resulting from a component defect in the valve. The valve was
 7 | replaced and a new diaphragm was installed. The system was proven oper-
 8 | able. The unit is now in full compliance with the requirements and no
 9 | further reporting is required.

5 | E | 28 | 0 | 9 | 9 | 29 | NA | 30 | B | 31 | Person performing "rounds" | 32
 8 9 FACILITY STATUS 10 11 % POWER 12 13 OTHER STATUS 14 15 METHOD OF DISCOVERY 16 17 DISCOVERY DESCRIPTION
 6 | Z | 33 | Z | 34 | NA | 35 | NA | 36
 8 9 ACTIVITY CONTENT 10 11 RELEASED OF RELEASE 12 13 AMOUNT OF ACTIVITY 14 15 LOCATION OF RELEASE
 7 | 0 | 0 | 0 | 37 | Z | 38 | NA | 39
 8 9 PERSONNEL EXPOSURES 10 11 NUMBER 12 13 TYPE 14 15 DESCRIPTION
 6 | 0 | 0 | 0 | 40 | NA | 41
 8 9 PERSONNEL INJURIES 10 11 NUMBER 12 13 DESCRIPTION
 9 | Z | 42 | NA | 43
 8 9 LOSS OF OR DAMAGE TO FACILITY 10 11 TYPE 12 13 DESCRIPTION
 6 | N | 44 | NA | 45
 8 9 PUBLICITY 10 11 ISSUED 12 13 DESCRIPTION
 6 | N | 44 | NA | 45
 8 9 PUBLICITY 10 11 ISSUED 12 13 DESCRIPTION

NAME OF OPERATOR: C. L. Coggin - Supt. Plt. Eng. Serv. PHONE: 912-367-7851

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