

LICENSEE EVENT REPORT

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

0 1 | N | J | O | C | P | 1 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 1 | 1 | 1 | 1 | 4 | _____ | 5
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
LICENSEE CODE LICENSE NUMBER LICENSE TYPE CAT 68

CON'T
 0 1 | L | 6 | 0 | 5 | 0 | 0 | 0 | 2 | 1 | 1 | 9 | 7 | 0 | 4 | 1 | 0 | 8 | 2 | 8 | 0 | 5 | 2 | 0 | 8 | 2 | 9
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
REPORT SOURCE DOCKET NUMBER EVENT DATE REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 | Local Leak Rate Testing identified five containment isolation valves
 0 3 | and one gasket that did not meet the 11.9 SCFH acceptance criteria. This
 0 4 | constitutes abnormal degradation of primary containment integrity. This
 0 5 | event is considered to be reportable per Tech Specs, paragraph 6.9.2.a.3.
 0 6 | Safety significance is minimal due to redundant valves or gasket.
 0 7 | _____
 0 8 | _____

0 9 | S | D | 11 | X | 12 | Z | 13 | V | A | L | I | V | E | X | 14 | E | 15 | D | 16
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
SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP SUBCODE VALVE SUBCODE
 17 | 8 | 2 | 21 | 22 | 0 | 1 | 1 | 4 | 24 | 25 | 0 | 1 | 28 | 29 | T | 30 | 0 | 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
LER/RO REPORT NUMBER EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVISION NO.
 18 | Z | 19 | Z | 20 | 0 | 0 | 0 | 0 | 27 | Y | 23 | N | 24 | Z | 25 | _____ | 26
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
ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS ATTACHMENT SUBMITTED NFRD-4 FORM SUB PRIME COMP. SUPPLIER COMPONENT MANUFACTURER

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 | 1-8 surp discharge seats had degraded. Drywell Purge & Torus Vent
 1 1 | Bypass had linkage misadjustment. Drywell airlock gasket damaged
 1 2 | while moving equipment. Torus to Reactor Building vacuum breaker had
 1 3 | misalignment of the linkage. All five containment isolation valves
 1 4 | were repaired and the one gasket replaced.

1 5 | G | 28 | 0 | 0 | 0 | 0 | 29 | NA | 30 | B | 31 | Local Leak Rate Test | 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
FACILITY STATUS % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION
 1 6 | Z | 33 | Z | 34 | NA | 35 | NA | 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
ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE
 1 7 | 0 | 0 | 0 | 0 | 37 | Z | 38 | NA | 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
PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION
 1 8 | 0 | 0 | 0 | 0 | 40 | NA | 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
PERSONNEL INJURIES NUMBER DESCRIPTION
 1 9 | Z | 42 | NA | 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
LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION
 2 0 | N | 44 | NA | 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
PUBLICITY ISSUED DESCRIPTION

NAME OF PREPARER Kenneth Hutko PHONE (609) 693-6098

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