## LICENSEE EVENT REPORT

	CONTROL BLOCK: (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)
0 1	C   0   F   S   V   1   2   0   0   -   0   0   0   0   -   0   0
O 1 8	SOURCE 60 61 DOCKET NUMBER 68 69 EVENT DATE 74 75 REPORT DATE 80 9
0 2	At 1550 hours on June 5, 1982, with the reactor at approximately 13% power, all three
0 3	480 volt essential buses were lost. As a result, the reactor was manually scrammed.
0 4	Power to the 4,000 volt equipment (feedwater, condensate, and circulating water pumps)
0 5	was not lost. No affect on public health and safety. Reportable per Fort St. Vrain
0 6	Technical Specification AC 7.5.2(b)3. No related reports.
0 7	
7 8	9 SYSTEM CAUSE CAUSE COMP. VALVE
0 9	CODE SUBCODE S
	COMPONENT   COMP
1 0	Upon investigation, it was found that one of two undervoltage relays (Westinghouse
1 1	type CV-2 voltage relay) was improperly calibrated due to inadequacy of the relay
1 2	calibration procedure. The procedure called for calibration of only one set of con-
1 3	tacts when two parallel sets are used at Fort St. Vrain. The plant was recovered
1 4 8	using emergency procedures and actions. The inadequate procedure was updated to indi-j grate the correct type of contact arrangement used at FSV. No further corrective action is status appears other status and actions. The inadequate procedure was updated to indi-j grate the correct type of contact arrangement used at FSV. No further corrective action is procedure was updated to indi-j grate the correct type of contact arrangement used at FSV. No further corrective action is procedure was updated to indi-j grate the correct type of contact arrangement used at FSV. No further corrective action is procedure was updated to indi-j grate the correct type of contact arrangement used at FSV. No further corrective action is procedure was updated to indi-j grate the correct type of contact arrangement used at FSV. No further corrective action is procedure was updated to indi-j grate the correct type of contact arrangement used at FSV. No further corrective action is procedure was updated to indi-j grateful gratefu
7 8 1 6 7 8	ACTIVITY CONTENT 12 13 44 45 46  RELEASED OF RELEASE AMOUNT OF ACTIVITY 36 N/A LOCATION OF RELEASE 36 N/A PERSONNEL EXPOSURES 80
1 7 7	NUMBER OF TYPE DESCRIPTION (39)  O O O O (37) Z (38) N/A  PERSONNEL INJURIES  13  80
1 8	NUMBER OESCRIPTION (41) N/A  11 12 80
1 9	LOSS OF OR DAMAGE TO FACILITY 43  TYPE DESCRIPTION  Z 42 N/A  PUBLICITY PDR ADOCK 05000267  ISSUED DESCRIPTION 45  S PDR
7 8	NAME OF PREPARER Charles Fully  NAME OF PREPARER (303) 785-2224