

# LICENSEE EVENT REPORT

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

01 | N | J | S | G | S | 2 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 1 | 1 | 1 | 1 | 4 | 5

CON'T  
01 | REPORT SOURCE | L | 6 | 0 | 5 | 0 | 0 | 0 | 3 | 1 | 1 | 7 | 0 | 8 | 2 | 4 | 8 | 2 | 8 | 0 | 9 | 1 | 6 | 8 | 2 | 9

### EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 | At 0030 hours, August 24, 1982, the Control Room Operator observed a low service  
03 | water flow indication on No. 25 Containment Fan Coil Unit (CFCU). No. 25 CFCU was  
04 | declared inoperable and Action Statement 3.6.2.3a was entered at 0035 hours,  
05 | August 24, 1982.  
06 |  
07 |  
08 |

09 | SYSTEM CODE | S | B | 11 | CAUSE CODE | X | 12 | CAUSE SUBCODE | Z | 13 | COMPONENT CODE | Z | Z | Z | Z | Z | Z | 14 | COMP. SUBCODE | Z | 15 | VALVE SUBCODE | Z | 16

17 | LER/RO REPORT NUMBER | 8 | 2 | 21 | 22 | SEQUENTIAL REPORT NO. | 0 | 8 | 8 | 24 | 26 | OCCURRENCE CODE | 0 | 3 | 28 | 29 | REPORT TYPE | I | 30 | REVISION NO. | 0 | 32

ACTION TAKEN | X | 18 | FUTURE ACTION | Z | 19 | EFFECT ON PLANT | Z | 20 | SHUTDOWN METHOD | Z | 21 | HOURS | 0 | 0 | 0 | 0 | 37 | 40 | ATTACHMENT SUBMITTED | Y | 23 | NRPD-4 FORM SUB. | N | 24 | PRIME COMP. SUPPLIER | Z | 25 | COMPONENT MANUFACTURER | Z | 9 | 9 | 9 | 26

### CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

10 | This occurrence was due to the air regulator being out of adjustment. The air  
11 | regulator was properly adjusted and No. 25 CFCU was satisfactorily tested. At  
12 | 0445 hours, August 24, 1982, No. 25 CFCU was declared operable and Action Statement  
13 | 3.6.2.3a was terminated.  
14 |

15 | FACILITY STATUS | E | 28 | % POWER | 0 | 8 | 2 | 29 | OTHER STATUS | NA | 30 | METHOD OF DISCOVERY | A | 31 | DISCOVERY DESCRIPTION | Operator Surveillance | 32

16 | ACTIVITY CONTENT RELEASED | Z | 33 | AMOUNT OF ACTIVITY | NA | 34 | 35 | LOCATION OF RELEASE | NA | 36

17 | PERSONNEL EXPOSURES NUMBER | 0 | 0 | 0 | 37 | TYPE | Z | 38 | DESCRIPTION | NA | 39

18 | PERSONNEL INJURIES NUMBER | 0 | 0 | 0 | 40 | DESCRIPTION | NA | 41

19 | LOSS OF OR DAMAGE TO FACILITY TYPE | Z | 42 | DESCRIPTION | NA | 43

20 | PUBLICITY ISSUED | N | 44 | DESCRIPTION | NA | 45 | 8210010412 820916 PDR ADOCK 05000311 S PDR

NAME OF PREPARER: R. Heller PHONE: 609/935-6000 Ext 3078