

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

01 | S | C | V | C | S | 1 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 1 | 0 | 0 | 0 | 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 36

CONT  
01 | REPORT SOURCE | L | 6 | 0 | 5 | 0 | 0 | 0 | 0 | 3 | 9 | 5 | 7 | 1 | 1 | 1 | 7 | 8 | 2 | 8 | 1 | 2 | 1 | 6 | 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  
DOCKET NUMBER EVENT DATE REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 | On November 17, 1982, with the Plant in Mode 1 (10% Reactor Power), the Main  
03 | Control Board Indication for Steam Generator Feedwater Flow (FI-477, FI-486,  
04 | FI-487) was discovered to be reading zero (0). There were no adverse  
05 | consequences since the downscale failure of the instruments was in the safe  
06 | direction. This trip is redundant to the Steam Generator Water Level Low-Low  
07 | trip and would have responded correctly if steamflow had exceeded feedwater flow  
08 | by the set limit.

09 | SYSTEM CODE: IA (11) CAUSE CODE: A (12) CAUSE SUBCODE: C (13) COMPONENT CODE: INSTRU (14) COMP. SUBCODE: T (15) VALVE SUBCODE: Z (16)  
17 | LER/RO REPORT NUMBER: 82 (17) EVENT YEAR: 82 (21) SEQUENTIAL REPORT NO.: 046 (24) OCCURRENCE CODE: / (27) REPORT TYPE: L (30) REVISION NO.: 0 (32)  
ACTION TAKEN: E (18) FUTURE ACTION: H (19) EFFECT ON PLANT: Z (20) SHUTDOWN METHOD: Z (21) HOURS: 0000 (22) ATTACHMENT SUBMITTED: Y (23) NPSR-4 FORM SUB.: N (24) PRIME COMP. SUPPLIER: N (25) COMPONENT MANUFACTURER: W120 (26)

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

10 | Failure appears to be personnel error during power operational testing. The  
11 | equalizing valves on the three (3) transmitters were found open. Proper  
12 | indication was re-established upon valve closure. The Licensee has  
13 | indoctrinated personnel on the removal and restoration of instruments and  
14 | observance of indications.

15 | FACILITY STATUS: B (28) % POWER: 010 (29) OTHER STATUS: N/A (30) METHOD OF DISCOVERY: A (31) DISCOVERY DESCRIPTION: Operator Observation (32)

16 | ACTIVITY CONTENT RELEASED OF RELEASE: Z (33) AMOUNT OF ACTIVITY: N/A (35) LOCATION OF RELEASE: N/A (36)

17 | PERSONNEL EXPOSURES NUMBER: 000 (37) TYPE: Z (38) DESCRIPTION: N/A (39)

18 | PERSONNEL INJURIES NUMBER: 000 (40) DESCRIPTION: N/A (41)

19 | LOSS OF OR DAMAGE TO FACILITY TYPE: Z (42) DESCRIPTION: N/A (43)

20 | PUBLICITY ISSUED DESCRIPTION: N (44) DESCRIPTION: N/A (45)

NAME OF PREPARER

*C. J. McKinney*  
C. J. McKinney

PHONE: (803) 345-5209