

CONCURRENCE SHEET FOR HOO PROCEDURES

PROCEDURE: A.15 MINING EVENTS

mark 7/19/94 ORIGINATOR

RESPONSE COORDINATION SECTION (Do we need to make notifications per step 4 if recovery solutica is involved ?)

RESPONSE OPERATIONS

NMSS (Note that form 361a is attached to the procedure. Are there any other questions that should be asked to gage the severity of the event? Also can you give us guidance on when we should wake people up in the middle of the night and when an event can wait until morning.)

CLg

HOO SECTION CHIEF

IRB BRANCH CHIEF

NRC HEADQUARTERS OPERATIONS OFFICER PROCEDURES

INDEX AND APPROVAL SHEET

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A.2	03/01/90	1	C.2	06/18/92	1
A.3	02/27/92	1	C.3	06/18/92	3
A.4	06/18/92	1	C.4	07/18/94	2
A.5	02/27/92	2	C.5	06/18/92	1
A.6.0	06/18/92	1	C.6	06/18/92	1
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A.6.3	03/01/90	1			
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A.6.5	03/01/90	1			
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A.6.7	01/13/94	1			
A.6.8	06/18/92	1			
A.6.9	05/27/92	1			
A.7.1	06/28/92	2			
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A.11	06/18/92	1			
A.12	02/27/92	1			
A.13	01/11/94	1			
A.14	06/22/93	1			
A.15	07/19/94	1			
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EQUIPMENT/MISC PROCEDURES

D.3	DIMENSION CONSOLE
D.4.2	24-HR TAPE POLICY
D.5	ET ROOM CONF SYS
E.2	STANCIL RECORDER

Originator: [Signature]
 Operations Officer
 Reviewed: [Signature]
 Chief, Operations Section
 Approved: [Signature]
 Chief, Incident Response Branch

Date: 7/19/94
 Date: 7/19/94
 Date: _____

HOO A.15

Mining Events

1. OBTAIN THE FOLLOWING INFORMATION ALONG WITH THE EVENT DESCRIPTION (Use form 361A Fuel Cycle and Materials Event Notification Worksheet):
 - a) For in-situ leach mine operations obtain the following:
 - 1) The location of the spill within the process/facility. (e.g. Does the spill involve recovery solution sometimes referred to as "pregnant lexiviant")
 - 2) Quantity of material spilled and content of U308.
 - 3) Status of the spill
 - a) Has the spill been stopped?
 - b) Has the spill been contained?
2. NOTIFY REGION IV. (LIST 24)
Remind the Region to notify the affected State(s)
3. NOTIFY THE NMSS EO AND STATE PROGRAMS (LISTS 24 & 15)
4. NOTIFY THE FOLLOWING FEDERAL AGENCIES for all radiological releases. (i.e. if the spill involved recovery solution)
 - a) EPA b) HHS c) USDA d) DOE e) FEMA (LIST 19)

NRC FORM 361A

U. S. NUCLEAR REGULATORY COMMISSION

LICENSE NUMBER

(1-94)

FUEL CYCLE AND MATERIALS EVENT NOTIFICATION WORKSHEET

REPORT TIME	FACILITY OR ORGANIZATION	NAME OF CALLER	CALLBACK TELEPHONE NUMBER () -
EVENT TIME	EVENT DATE / /	LOCATION OF EVENT (INCLUDE COUNTY AND STATE)	PORTION OF PLANT AFFECTED
EVENT CLASSIFICATIONS		EVENT TYPES	INCIDENT REPORTS (30.50, 40.60, 70.50)
GENERAL EMERGENCY *	FUEL CYCLE	20.2201 LOSS/THEFT	(a) PROTECTIVE ACTION PREVENTED
SITE AREA EMERGENCY	MEDICAL/ACADEMIC	20.2202 ACTUAL / THREATENED OVEREXPOSURE	(b)(1) UNPLANNED CONTAMINATION
ALERT	TRANSPORTATION	20.2202 ACTUAL / THREATENED RELEASE	(b)(2) SAFETY EQUIPMENT FAILURE
NOTIFICATION OF UNUSUAL EVENT *	WASTE MANAGEMENT	21.21 DEFECT / NONCOMPLIANCE	(b)(3) MEDICAL TREATMENT WITH CONTAMINATION
INCIDENT REPORT	INDUSTRIAL / COMMERCIAL	26.73 FITNESS FOR DUTY	(b)(4) FIRE / EXPLOSION
TRANSPORTATION EVENT	FOREIGN EVENT	35.33 MISADMINISTRATION	70.52 CRITICALITY / SNM LOST
INFORMATION ONLY	OTHER (Specify)	36.83 IRRADIATOR EVENT	70.52 ACTUAL / ATTEMPTED THEFT
OTHER (Specify)		39.77 RUPTURED WELL LOGGING SOURCE	CRITICALITY CONTROL 4-HOUR (BULLETIN 91-01)
		39.77 IRRETRIEVABLE WELL LOGGING SOURCE	CRITICALITY CONTROL 24-HOUR (BULLETIN 91-01)
		40.26 TAILINGS / WASTE DAM FAILURE	OTHER NON-CFR REQUIREMENT
* ONLY UNDER OLD 1981 ORDER			
NOTIFICATIONS	YES	NO	WILL BE
NRC REGION ?			
STATE ?			
LOCAL ?			
OTHER GOVERNMENT AGENCIES ?			
PRESS RELEASE ?			
ANYTHING UNUSUAL OR NOT UNDERSTOOD?		YES (Explain below)	
		NO	
DID ALL SYSTEMS FUNCTION AS REQUIRED?		YES	
		NO (Explain below)	
ADDITIONAL INFORMATION ON BACK?		YES	
		NO	

EVENT DESCRIPTION (Continue on reverse if necessary)

RADIOLOGICAL / CHEMICAL RELEASES: CHECK OR FILL IN APPLICABLE ITEMS

ISOTOPE	ACTIVITY	PHYSICAL FORM	CHEMICAL FORM		STACK	LIQUID EFFLUENT	OTHER
				MONITOR READING			
				ALARM SETPOINT			

PERSONNEL EXPOSURE / CONTAMINATION DATA

ONGOING RELEASE		
TERMINATED RELEASE	NUMBER OF PERSONNEL EXPOSED	NUMBER OF PERSONNEL CONTAMINATED
OFFSITE RELEASE	MAXIMUM EXTERNAL DOSE	MAXIMUM EXTERNAL LEVEL
ONSITE AREAS EVACUATED	MAXIMUM INTERNAL DOSE	MAXIMUM INTERNAL LEVEL
OFFSITE PROTECTIVE ACTION RECOMMENDED	CRITICAL ORGAN (IF KNOWN)	CRITICAL ORGAN (IF KNOWN)

DEGRADED CRITICALITY SAFETY CONTROLS FOR ACCIDENT SCENARIO(S) (BULLETIN 91-01)

ALL CONTROLS LOST	ALL BUT SINGLE CONTROL LOST	DEFICIENT SAFETY ANALYSIS	SAFETY SIGNIFICANCE UNKNOWN	>45% MINIMUM CRITICAL MASS PRESENT OR READILY AVAILABLE
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NUMBER AND TYPES OF CONTROLS NECESSARY UNDER NORMAL OPERATING CONDITIONS

NUMBER AND TYPES OF CONTROLS WHICH FUNCTIONED PROPERLY UNDER UPSET CONDITIONS

NUMBER AND TYPES OF CONTROLS NECESSARY TO RESTORE A SAFE SITUATION

SAFETY SIGNIFICANCE OF EVENTS

SAFETY EQUIPMENT STATUS

STATUS OF CORRECTIVE ACTIONS

EVENT DESCRIPTION (Continued)