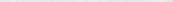


**LICENSEE EVENT REPORT**

CONTROL BLOCK: 

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0	1	G	A	E	I	H	2	2	0	0	-	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4			5		
7	8	LICENSEE CODE						14	15	LICENSE NUMBER										25	26	LICENSE TYPE					30	57	CAT		58

CON'T

REPORT SOURCE 0 1 7 8 L 6 0 5 0 0 0 3 6 6 7 0 2 1 4 8 3 8 0 3 1 0 8 3 9  
60 61 DOCKET NUMBER 68 69 EVENT DATE 74 75 REPORT DATE 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 | During performance of the "COMSIP DELPHI MODEL K-1V H2 O2 ANALYZER"  
0 3 | procedure, the worker discovered that Drywell H2 O2 "B" analyzer would  
0 4 | not calibrate. It was declared inoperable. This event is contrary to  
0 5 | Tech. Specs. section 3.3.6.4, and Table 3.3.6.4-1, Item 9. A 30-day LCO  
0 6 | was established per Tech. Specs. section 3.3.6.4, ACTION a. Public  
0 7 | health and safety were not affected by this repetitive event as last  
0 8 | reported on LER 50-366/1982-063.

SYSTEM CODE S E 11		CAUSE CODE E 12		CAUSE SUBCODE B 13		COMPONENT CODE I N S T R U 14				COMP. SUBCODE E 15		VALVE SUBCODE Z 16					
LER/RO REPORT NUMBER 17		EVENT YEAR 8 3 21 22		SEQUENTIAL REPORT NO. 0 0 3 24 26		OCCURRENCE CODE / 27		REPORT TYPE L 30		REVISION NO. 0 32							
ACTION TAKEN A 18		FUTURE ACTION F 19		EFFECT ON PLANT Z 20		SHUTDOWN METHOD Z 21		HOURS 0 0 0 0 22		ATTACHMENT SUBMITTED N 23		NPRD-4 FORM SUB. N 24		PRIME COMP. SUPPLIER N 25		COMPONENT MANUFACTURER X 9 9 9 26	

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 After investigation, the worker replaced the sample pump head assemblies  
1 1 and diaphragms and cleaned the bypass check valves. The system was then  
1 2 satisfactorily functionally tested per procedure and returned to service  
1 3 on 2/28/83. "A" and "B" H2 O2 analyzers will be replaced in the future  
1 4 with an improved model per Design Change Request 81-165.

7 8 9

FACILITY STATUS (28) % POWER (29) OTHER STATUS (30) METHOD OF DISCOVERY (31) DISCOVERY DESCRIPTION (32)

1 5 E 0 6 9 NA E Routine Surveillance

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 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50

ACTIVITY CONTENT  
RELEASED OF RELEASE

1	6	Z	33	Z	34	AMOUNT OF ACTIVITY (35)		LOCATION OF RELEASE (36)	
7	8	9	10	11	NA		NA		

7 8 9 10 11 44 45 80

PERSONNEL EXPOSURES									
NUMBER			TYPE	DESCRIPTION					
1	7	0	0	0	(37) Z (38) NA	(39)			

PERSONNEL INJURIES										
NUMBER			DESCRIPTION (41)							
1	8	0	0	0	40	NA				
7	8	9			11	12	80			

LOSS OF OR DAMAGE TO FACILITY (43)  
TYPE DESCRIPTION  
1 9 Z (42) NA  
3 8 9 10 8202710300 820210

PUBLICITY  
 ISSUED DESCRIPTION (45)  
 2 0 N (44) NA  
 7 8 9 10 68 69 80  
 8503210320 830310  
 PDR ADDCK 05000366  
 S PDR  
 NRC USE ONLY

NAME OF PREPARER S. B. Tipps

PHONE (912) 367-7851