

LICENSEE EVENT REPORT (LER)

FACILITY NAME (1) North Anna Unit 1	DOCKET NUMBER (2) 0 5 0 0 0 3 3 8	PAGE (3) 1 OF 0 2
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TITLE (4)  
Liquid Waste Discharge Without Demineralizer Treatment

EVENT DATE (5)			LER NUMBER (6)			REPORT DATE (7)			OTHER FACILITIES INVOLVED (8)		
MONTH	DAY	YEAR	YEAR	SEQUENTIAL NUMBER	REVISION NUMBER	MONTH	DAY	YEAR	FACILITY NAMES		DOCKET NUMBER(S)
0 9	2 5	8 4	8 4	0 1 3	0 0	1 0	2 5	8 4	North Anna Unit 2		0 5 0 0 0 3 3 9
											0 5 0 0 0

OPERATING MODE (9) 2

POWER LEVEL (10) 0 0 3

THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR §: (Check one or more of the following) (11)

<input type="checkbox"/> 20.402(b)	<input type="checkbox"/> 20.406(e)	<input type="checkbox"/> 50.73(a)(2)(iv)	<input type="checkbox"/> 73.71(b)
<input type="checkbox"/> 20.406(a)(1)(i)	<input type="checkbox"/> 50.38(e)(1)	<input type="checkbox"/> 50.73(a)(2)(v)	<input type="checkbox"/> 73.71(c)
<input type="checkbox"/> 20.406(a)(1)(ii)	<input type="checkbox"/> 50.38(e)(2)	<input type="checkbox"/> 50.73(a)(2)(vii)	<input checked="" type="checkbox"/> OTHER (Specify in Abstract below and in Text, NRC Form 365A)
<input type="checkbox"/> 20.406(a)(1)(iii)	<input type="checkbox"/> 50.73(a)(2)(i)	<input type="checkbox"/> 50.73(a)(2)(viii)(A)	
<input type="checkbox"/> 20.406(a)(1)(iv)	<input type="checkbox"/> 50.73(a)(2)(ii)	<input type="checkbox"/> 50.73(a)(2)(viii)(B)	
<input type="checkbox"/> 20.406(a)(1)(v)	<input type="checkbox"/> 50.73(a)(2)(iii)	<input type="checkbox"/> 50.73(a)(2)(ix)	

LICENSEE CONTACT FOR THIS LER (12)

NAME J. Wayne Harrell	TELEPHONE NUMBER AREA CODE 7 0 3 8 9 4 - 5 1 5 1
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COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT (13)

CAUSE	SYSTEM	COMPONENT	MANUFACTURER	REPORTABLE TO NPRDS	CAUSE	SYSTEM	COMPONENT	MANUFACTURER	REPORTABLE TO NPRDS

SUPPLEMENTAL REPORT EXPECTED (14)

YES (If yes, complete EXPECTED SUBMISSION DATE)  NO

EXPECTED SUBMISSION DATE (15)

MONTH	DAY	YEAR

ABSTRACT (Limit to 1400 spaces, i.e., approximately fifteen single-space typewritten lines) (16)

ABSTRACT

From September 10 to September 25, 1984, liquid radwaste was discharged without treatment with projected doses to Unrestricted Areas being in excess of the limits specified in T.S. 3.11.1.3. The clarifier effluent was discharged without treatment because the clarifier demineralizer in service during the time did not contain any resin required for ion exchange. The empty clarifier demineralizer was placed in service on September 10, 1984 due to lack of adequate controls placed on demineralizer status. Upon discovery of the inoperable clarifier demineralizer, the redundant loaded clarifier demineralizer was placed in service.

The applicable Operating Procedures will be reviewed and adequate administrative controls will be included to ensure that the clarifier demineralizer status is known prior to placing them in service.

This event is reportable as a Special Report pursuant to Unit 1 and Unit 2 Technical Specifications 3.11.1.3.a and 6.9.2.

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PDR ADOCK 05000338  
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LICENSEE EVENT REPORT (LER) TEXT CONTINUATION

FACILITY NAME (1)  North Anna Unit 1	DOCKET NUMBER (2)  0   5   0   0   0   3   3   8	LER NUMBER (6)			PAGE (3)	
		YEAR	SEQUENTIAL NUMBER	REVISION NUMBER		
		8   4	—   0   1   3	—   0   0	0   2	OF 0   2

TEXT (If more space is required, use additional NRC Form 388A's) (17)

On September 25, 1984, with Unit 1 in Mode 2 following a refueling outage and Unit 2 in Mode 6, the "B" liquid waste mixed bed clarifier demineralizer (EIIS Identifier DM) which had been in service since September 10, 1984, was found to contain no resin required for ion exchange. The "B" clarifier demineralizer was initially placed in service on September 10 because projected doses to Unrestricted Areas due to clarifier effluent were determined to be in excess of the limits specified in T.S. 3.11.1.3. Consequently, between September 10 and September 25, 1984, clarifier effluent was discharged without treatment with projected doses due to liquid effluent in excess of the specified limits. The discharge path of the clarifier effluent is into the Circulating Water (EIIS System Identifier NN) discharge canal and subsequently into the North Anna Reservoir (EIIS Identifier RVR).

The unloaded clarifier demineralizer was placed in service because inadequate controls existed for checking the operable status of the demineralizers prior to placing them in service. When the error was discovered on September 25, 1984, the redundant loaded "A" liquid waste mixed bed clarifier demineralizer was placed in service. The high level liquid radwaste treatment system was fully operational throughout the event and high level liquid radwaste was properly demineralized prior to discharge to the clarifier. The dose to the maximum exposed member of the public from radioactive materials in released clarifier effluents did not exceed the limits specified in T.S. 3.11.1.2 for the then current quarter. Therefore the health and safety of the public were not affected.

In order to prevent recurrence of a similar event, Operations personnel were instructed of the importance of verifying clarifier demineralizer status when required to place them in service. Operating Procedures for the Liquid Waste System (EIIS System Identifier WD) will be reviewed for adequacy. Proper controls will be included to ensure that the status of the clarifier demineralizers are verified when they are required for service.

This event is reportable as a Special Report pursuant to Unit 1 and Unit 2 Technical Specifications 3.11.1.3.a and 6.9.2.

# Vepco

VIRGINIA ELECTRIC AND POWER COMPANY

NORTH ANNA POWER STATION

P. O. BOX 402

MINERAL, VIRGINIA 23117

October 25, 1984

U. S. Nuclear Regulatory Commission  
Document Control Desk  
016 Phillips Building  
Washington, D.C. 20555

Serial No. 84-022

NO/JRR: 11

Docket No. 50-338

License No. NPF-4

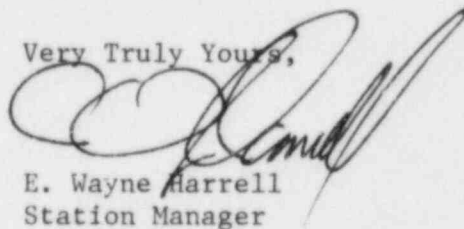
Dear Sirs:

The Virginia Electric and Power Company hereby submits the following updated License Event Report applicable to North Anna Unit No. 1.

Report No. LER 84-013-00

This report has been reviewed by the Station Nuclear Safety and Operating Committee and will be forwarded to Safety Evaluation and Control for their review.

Very Truly Yours,



E. Wayne Harrell  
Station Manager

Enclosures (3 copies)

cc: Mr. James P. O'Reilly, Regional Administrator  
U. S. Nuclear Regulatory Commission  
Region II  
101 Marietta Street, Suite 2900  
Atlanta, Georgia 30303

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11