

LICENSEE EVENT REPORT (LER)

|  |                                      |                      |
|--|--------------------------------------|----------------------|
| FACILITY NAME (1)<br>Dresden Nuclear Power Station | DOCKET NUMBER (2)<br>0 5 0 0 0 2 4 9 | PAGE (3)<br>1 OF 0 2 |
|--|--------------------------------------|----------------------|

TITLE (4)  
Reactor Scram on Low Water Level

| 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 8   | 2 1  | 8 4                      | 8 4                                 | 0 1 0                | 0 0  | 0 9             | 1 0 | 8 4  | N/A                           |  | 0 5 0 0 0        |                         |  |  |  |  |  |  |  |  |  |  |                           |           |           |                                     |                 |          |                 |             |                          |                |          |                  |             |                          |                  |  |                   |                |                          |                      |                  |                 |                          |                      |                 |                  |                          |                |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">OPERATING MODE (9)<br/>N</td> <td colspan="10">THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR 5: (Check one or more of the following) (11)</td> </tr> <tr> <td rowspan="5">POWER LEVEL (10)<br/>0 9 7</td> <td>20.402(b)</td> <td>20.406(c)</td> <td><input checked="" type="checkbox"/></td> <td>50.73(a)(2)(iv)</td> <td>73.71(b)</td> </tr> <tr> <td>20.406(a)(1)(i)</td> <td>50.36(c)(1)</td> <td><input type="checkbox"/></td> <td>50.73(a)(2)(v)</td> <td>73.71(c)</td> </tr> <tr> <td>20.406(a)(1)(ii)</td> <td>50.36(c)(2)</td> <td><input type="checkbox"/></td> <td>50.73(a)(2)(vii)</td> <td rowspan="3">OTHER (Specify in Abstract below and in Text, NRC Form 366A)</td> </tr> <tr> <td>20.406(a)(1)(iii)</td> <td>50.73(a)(2)(i)</td> <td><input type="checkbox"/></td> <td>50.73(a)(2)(viii)(A)</td> </tr> <tr> <td>20.406(a)(1)(iv)</td> <td>50.73(a)(2)(ii)</td> <td><input type="checkbox"/></td> <td>50.73(a)(2)(viii)(B)</td> </tr> <tr> <td>20.406(a)(1)(v)</td> <td>50.73(a)(2)(iii)</td> <td><input type="checkbox"/></td> <td>50.73(a)(2)(x)</td> <td></td> </tr> </table> |  |                          |                                     |                      |  |                 |     |      |                               |  |                  | OPERATING MODE (9)<br>N | THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR 5: (Check one or more of the following) (11) |  |  |  |  |  |  |  |  |  | POWER LEVEL (10)<br>0 9 7 | 20.402(b) | 20.406(c) | <input checked="" type="checkbox"/> | 50.73(a)(2)(iv) | 73.71(b) | 20.406(a)(1)(i) | 50.36(c)(1) | <input type="checkbox"/> | 50.73(a)(2)(v) | 73.71(c) | 20.406(a)(1)(ii) | 50.36(c)(2) | <input type="checkbox"/> | 50.73(a)(2)(vii) | OTHER (Specify in Abstract below and in Text, NRC Form 366A) | 20.406(a)(1)(iii) | 50.73(a)(2)(i) | <input type="checkbox"/> | 50.73(a)(2)(viii)(A) | 20.406(a)(1)(iv) | 50.73(a)(2)(ii) | <input type="checkbox"/> | 50.73(a)(2)(viii)(B) | 20.406(a)(1)(v) | 50.73(a)(2)(iii) | <input type="checkbox"/> | 50.73(a)(2)(x) |  |
| OPERATING MODE (9)<br>N   | THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR 5: (Check one or more of the following) (11) |                          |                                     |                      |  |                 |     |      |                               |  |                  |                         |  |  |  |  |  |  |  |  |  |  |                           |           |           |                                     |                 |          |                 |             |                          |                |          |                  |             |                          |                  |  |                   |                |                          |                      |                  |                 |                          |                      |                 |                  |                          |                |  |
| POWER LEVEL (10)<br>0 9 7   | 20.402(b)  | 20.406(c)                | <input checked="" type="checkbox"/> | 50.73(a)(2)(iv)      | 73.71(b)   |                 |     |      |                               |  |                  |                         |  |  |  |  |  |  |  |  |  |  |                           |           |           |                                     |                 |          |                 |             |                          |                |          |                  |             |                          |                  |  |                   |                |                          |                      |                  |                 |                          |                      |                 |                  |                          |                |  |
|   | 20.406(a)(1)(i)  | 50.36(c)(1)              | <input type="checkbox"/>            | 50.73(a)(2)(v)       | 73.71(c)   |                 |     |      |                               |  |                  |                         |  |  |  |  |  |  |  |  |  |  |                           |           |           |                                     |                 |          |                 |             |                          |                |          |                  |             |                          |                  |  |                   |                |                          |                      |                  |                 |                          |                      |                 |                  |                          |                |  |
|   | 20.406(a)(1)(ii)   | 50.36(c)(2)              | <input type="checkbox"/>            | 50.73(a)(2)(vii)     | OTHER (Specify in Abstract below and in Text, NRC Form 366A) |                 |     |      |                               |  |                  |                         |  |  |  |  |  |  |  |  |  |  |                           |           |           |                                     |                 |          |                 |             |                          |                |          |                  |             |                          |                  |  |                   |                |                          |                      |                  |                 |                          |                      |                 |                  |                          |                |  |
|   | 20.406(a)(1)(iii)  | 50.73(a)(2)(i)           | <input type="checkbox"/>            | 50.73(a)(2)(viii)(A) |  |                 |     |      |                               |  |                  |                         |  |  |  |  |  |  |  |  |  |  |                           |           |           |                                     |                 |          |                 |             |                          |                |          |                  |             |                          |                  |  |                   |                |                          |                      |                  |                 |                          |                      |                 |                  |                          |                |  |
|   | 20.406(a)(1)(iv)   | 50.73(a)(2)(ii)          | <input type="checkbox"/>            | 50.73(a)(2)(viii)(B) |  |                 |     |      |                               |  |                  |                         |  |  |  |  |  |  |  |  |  |  |                           |           |           |                                     |                 |          |                 |             |                          |                |          |                  |             |                          |                  |  |                   |                |                          |                      |                  |                 |                          |                      |                 |                  |                          |                |  |
| 20.406(a)(1)(v)   | 50.73(a)(2)(iii)   | <input type="checkbox"/> | 50.73(a)(2)(x)                      |                      |  |                 |     |      |                               |  |                  |                         |  |  |  |  |  |  |  |  |  |  |                           |           |           |                                     |                 |          |                 |             |                          |                |          |                  |             |                          |                  |  |                   |                |                          |                      |                  |                 |                          |                      |                 |                  |                          |                |  |

LICENSEE CONTACT FOR THIS LER (12)

| NAME                   | TELEPHONE NUMBER |                     |
|------------------------|------------------|---------------------|
|                        | AREA CODE        | NUMBER              |
| Lawrence Coyle (X-483) | 8 1 1 5 9        | 4 2 1 - 2 1 9 2 1 0 |

COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT (13)

| CAUSE | SYSTEM | COMPONENT | MANUFAC-TURER | REPORTABLE TO NPROS | CAUSE | SYSTEM | COMPONENT | MANUFAC-TURER | REPORTABLE TO NPROS |
|-------|--------|-----------|---------------|---------------------|-------|--------|-----------|---------------|---------------------|
| X     | SIJ    | IFICIV    | CI6165        | N                   |       |        |           |               |                     |

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)

During normal operation, the "A" feedwater regulating valve operator vibrated loose from the valve stem coupling. The valve disc failed in the closed direction, causing the reactor to scram on low water level. Safety significance was minimal, since all emergency systems operated as designed. Previous similar occurrence reported by R.O. 84-09 on Docket 50-237.

The operator and valve stem were reconnected and holes were drilled into the coupling block and locknuts so set screws could be placed to secure the valve stem and valve operator to the coupling block.

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PDR ADOCK 05000249  
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LICENSEE EVENT REPORT (LER) TEXT CONTINUATION

|   |  |                |                   |                 |          |    |     |
|---|--|----------------|-------------------|-----------------|----------|----|-----|
| FACILITY NAME (1)<br><br>Dresden Nuclear Power Station Unit 3 | DOCKET NUMBER (2)<br><br>0 5 0 0 0 2 4 9 | LER NUMBER (6) |                   |                 | PAGE (3) |    |     |
|   |  | YEAR           | SEQUENTIAL NUMBER | REVISION NUMBER |          |    |     |
|   |  | 8 4 -          | 0 1 0 -           | 0 0             | 0 2      | OF | 0 2 |

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

During normal operation the "A" feedwater regulating valve (A03-642A) operator separated from the valve stem coupling. The valve disc failed in the closed direction, causing a reactor scram on low water level. Safety significance was minimal, since all emergency systems operated as designed. Previous similar occurrence reported by R.O. 84-09 on Docket 50-237.

The cause of the event was the loosening, due to vibration, of the locknut securing the operator to the coupling block at the top of the valve stem. The loose locknut permitted the operator to vibrate loose from the coupling block allowing the coupling block and the attached valve stem to fall into the closed position. The valve operator was reattached to the coupling block. To prevent a recurrence holes were drilled into the top and bottom side of the coupling block and set screws were installed to wedge against the valve operator and the valve stem. Also, holes were drilled into the top and bottom locknuts and set screws were installed to wedge against the top and bottom of the coupling block to prevent the locknuts from moving. This procedure was repeated on the "B" feedwater regulating valve. Set screws will be installed in the Unit 2 "A" feedwater regulating valve coupling block and associated locknuts during the fall 1984 refuel outage. The 2"B" feedwater regulating valve is of a different type, and will not require set screws.



**Commonwealth Edison**

Dresden Nuclear Power Station

R.R. #1

Morris, Illinois 60450

Telephone 815/942-2920

September 13, 1984

DJS Ltr #84-908

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

Licensee Event Report #84-010-0, Docket #050-249 is being submitted as required by Technical Specification 6.6, NUREG 1022 and 10 CFR 50.73 (a)(2)(iv).

D.J. Scott  
Station Superintendent  
Dresden Nuclear Power Station

DJS/kjl

Enclosure

cc: J.G. Keppler, Regional Administrator, Region III  
File/NRC  
File/Numerical

IE22  
/1