



Commonwealth Edison

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February 1, 1985

Mr. James G. Keppler
Regional Administrator
U.S. Nuclear Regulatory Commission
Region III
799 Roosevelt Road
Glen Ellyn, IL 60137

Subject: LaSalle County Station Units 1 and 2
Response to Inspection Report
Nos. 50-373/84-32 and 50-374/84-39
NRC Docket Nos. 50-373 and 50-374

Reference (a): W. S. Little letter to Cordell Reed
dated January 4, 1985.

Dear Mr. Keppler:

This letter is in response to the inspection conducted by Messrs. H. A. Walker, T. E. Taylor, and Ms. J. A. Malloy on November 27 through December 11, 1984, of activities at LaSalle County Station. Reference (a) indicated that certain activities appeared to be in noncompliance with NRC requirements. The Commonwealth Edison Company response to the Notice of Violation is provided in the enclosure.

If you have any further questions on this matter, please direct them to this office.

Very truly yours,

D. L. Farrar
Director of Nuclear Licensing

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Attachment

cc: NRC Resident Inspector - LSCS

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ATTACHMENT

COMMONWEALTH EDISON COMPANY

RESPONSE TO NOTICE OF VIOLATION

ITEM OF NONCOMPLIANCE

1. 10 CFR 50, Appendix B, Criterion XII, as implemented by Commonwealth Edison Quality Assurance Program Quality Requirement No. 12.0, requires that measuring and testing devices used in activities affecting quality be properly controlled, calibrated and adjusted at specified periods to maintain accuracy within necessary limits.

Contrary to the above, a significant number of portable tools, gauges and instruments were found to be unaccounted for, past calibration due dates or otherwise improperly controlled.

CORRECTIVE ACTION TAKEN AND RESULTS ACHIEVED

A total inventory of measuring and testing devices was taken. Those measuring and testing devices that could not be accounted for were deleted from the program, documented, and corrected with a discrepancy record.

CORRECTIVE ACTION TAKEN TO AVOID FURTHER NONCOMPLIANCE

In order to ensure compliance with LaSalle Station's Control of Measuring & Test Equipment Program (LAP-300-9) a dedicated management person has been assigned in each maintenance department. The assigned individuals are responsible for the control of measuring and test equipment and are fully aware of their responsibilities in this area.

DATE OF FULL COMPLIANCE

Full compliance has been achieved.

ITEM OF NONCOMPLIANCE

2. 16 CFR 50, Appendix B, Criterion XVI, as implemented by the Commonwealth Edison Quality Assurance Program Manual requires that corrective action be taken to preclude repetition when conditions adverse to quality are found.

Contrary to the above, the corrective action taken with regard to deficiencies identified in the calibration area was not satisfactory to preclude repetition. Discrepancy records generated by surveillance findings in this area were trended and although a significant trend did appear, it was not reported.

CORRECTIVE ACTION TAKEN AND RESULTS ACHIEVED

During the inspection a significant review of the portable test and measuring equipment program was performed by the Station Staff. During the review a complete inventory of all test and measuring equipment was performed. All records were reconciled and the results reviewed with the inspectors prior to the end of the inspection.

CORRECTIVE ACTION TAKEN TO AVOID FURTHER NONCOMPLIANCE

Technical Staff Procedure LTP 200-8 was revised to require a discussion in the summary of the cause of an increase in the numbers of discrepancy records in categories which should provide for early identification of unfavorable trends. In addition the distribution of the report has been expanded to provide larger dissemination of the information.

DATE OF FULL COMPLIANCE

The program review was completed prior to the end of the inspection. The procedure change was completed on December 12, 1984 and will be utilized for the fourth quarter report which will be completed by February 15, 1985.

ITEM OF NONCOMPLIANCE

3. Technical Specification, Section 6.2.A.6, requires that written procedures shall be prepared and adhered to for preventive and corrective maintenance operations which could have an effect on the safety of the facility.

Contrary to the above, preventive maintenance procedure LAP 300-4 ("Lubrication and Preventive Maintenance Program") was not followed, in that approximately one third of the safety-related lubrication activities listed on the November 23 through December 30, 1984, schedule were not performed within the specified time period.

CORRECTIVE ACTION TAKEN AND RESULTS ACHIEVED

All of the safety-related lubrication activities that were overdue between the period of November 23, 1984 thru December 31, 1984 have been completed.

CORRECTIVE ACTION TAKEN TO AVOID FURTHER NONCOMPLIANCE

To avoid further noncompliance with LAP 300-4 more attention will be paid to safety-related lubrication activities. In order to accomplish this a separate computer printout of scheduled safety-related lubrication activities will be provided each month to each department in order to ensure completion in a more timely manner. Also each department has assigned a foreman for coordination of lubrication activities to assure LaSalle compliance to our lubrication program.

DATE OF FULL COMPLIANCE

Full compliance has been achieved.