

NOV 9 1971

J. G. Keppler, Chief, Reactor Testing & Operations Branch
Division of Compliance, HQ

CO INQUIRY REPORT NO. 50-219/71-08
JERSEY CENTRAL POWER AND LIGHT COMPANY
OYSTER CREEK - BWR
EXCESSIVE LEAKAGE - MAIN STEAM ISOLATION VALVE (NSO-3B)

The subject inquiry report is forwarded for information.

The plant has been shutdown for removal of poison curtains, fuel replacement/reconstitution, and a turbine warranty inspection. Action by the licensee with respect to the subject issue is considered to be adequate.

We will follow up on repairs to this valve and keep you informed as appropriate. In any event, the results will be reviewed and reported during the next inspection at the site.

R. T. Carlson
Senior Reactor Inspector

Enclosure:
Subject Inquiry Report

- cc: E. G. Case, DRS (3)
- R. S. Boyd, DEL (2)
- R. C. DeYoung, DRL (2)
- D. J. Skovholt, DRL (3)
- H. R. Denton, DRS (2)
- A. Giambusso, CO
- L. Kornblith, CO
- R. H. Engelken, CO
- Regional Directors, CO
- DR Central Files

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PDR FOIA
DEKOK95-258 PDR

3/404

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|-----------|-------------|---------|--|--|--|--|
| OFFICE ▶ | CO | | | | | |
| SURNAME ▶ | Carlton:smg | Carlson | | | | |
| DATE ▶ | 11/9/71 | | | | | |

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U.S. ATOMIC ENERGY COMMISSION
COMPLIANCE STATISTICAL DATA

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|---|---|--------------------------|--|---|--|------------------------------------|
| A | A. DOCKET NUMBER 0500219 | B. REPORT NUMBER 7103 | C. PRIORITY/CATEGORY C | D. INQ./INSPECTION/INVESTIGATION DATES FROM 10/07/71 TO 10/08/71 | | F. REGION CONDUCTING ACTIVITY 1 |
| | LICENSEE/VENDOR Jersey Central Power & Light Company | | | FACILITY Oyster Creek 1 | | LICENSE NUMBER DPR-16 |
| G | ACTIVITY CONDUCTED: <input checked="" type="checkbox"/> 1 INSPECTION <input type="checkbox"/> 2 INQUIRY <input type="checkbox"/> 3 INVESTIGATION <input type="checkbox"/> 4 VENDOR INSPECTION <input type="checkbox"/> 5 MANAGEMENT VISIT <input type="checkbox"/> 6 INQUIRY-NON LICENSEE | | | | | |
| H | INSPECTION/INVESTIGATION RESULTS: <input type="checkbox"/> 1 591 <input checked="" type="checkbox"/> 7 REGIONAL OFFICE LETTER <input type="checkbox"/> 3 REFERRED TO HQS FOR ACTION | | | | | |
| J | INSPECTION/INVESTIGATION FINDINGS: <input checked="" type="checkbox"/> 1 CLEAR <input type="checkbox"/> 2 SAFETY ITEM <input type="checkbox"/> 3 NONCOMPLIANCE <input type="checkbox"/> 4 NONCONFORMANCE | | | | | |
| K | FIELD ACTION AS A RESULT OF INQUIRY <input type="checkbox"/> 1 CONDUCT INVESTIGATION <input type="checkbox"/> 2 REVIEW NEXT INSPECTION <input type="checkbox"/> 3 REFER TO OTHER REGION <input type="checkbox"/> 4 REFER TO NON-REG. AUTH. <input type="checkbox"/> 5 REFER TO OTHER REG. OFFICE <input type="checkbox"/> 6 HQS FOR ACTION <input type="checkbox"/> 7 NO FURTHER ACTION | | | | | |
| L | REASON INSP. FINDINGS REFERRED TO HEADQUARTERS FOR ACTION: | | SUBJECT OF INQUIRY OR INVESTIGATION: | | HEADQUARTERS ACTION ON INSPECTION AND INVESTIGATION: | |
| | <input type="checkbox"/> 01 IMMEDIATE THREAT TO HEALTH AND SAFETY <input type="checkbox"/> 02 COMPLEX ITEM INVOLVING: <input type="checkbox"/> 03 NONCOMPLIANCE/NONCONFORMANCE <input type="checkbox"/> 04 LICENSING PROBLEM <input type="checkbox"/> 05 POLICY MATTER <input type="checkbox"/> 06 INTERPRETATION <input type="checkbox"/> 07 SAFETY ITEM <input type="checkbox"/> 08 MANAGEMENT DEFICIENCY <input type="checkbox"/> 09 INADEQ. REPLY TO LETTER <input type="checkbox"/> 10 NO REPLY TO LETTER <input type="checkbox"/> 11 NO CORRECTIVE ACTION PLANNED <input type="checkbox"/> 12 INADEQUATE CORRECTIVE ACTION PLANNED <input type="checkbox"/> 13 HQS LETTER REQUIRED <input type="checkbox"/> 14 HQS REVIEW REQUIRED <input type="checkbox"/> 15 UNREVIEWED SAFETY MATTER <input type="checkbox"/> 16 DESIGN CHANGE <input type="checkbox"/> 17 OTHER <input type="checkbox"/> 18 <input type="checkbox"/> 19 | | <input type="checkbox"/> 01 TYPE A INT. OVEREXPOSURE <input type="checkbox"/> 02 TYPE A EXT. OVEREXPOSURE <input type="checkbox"/> 03 TYPE A RELEASE <input type="checkbox"/> 04 TYPE A LOSS OF FACILITY <input type="checkbox"/> 05 TYPE A PROPERTY DAMAGE <input type="checkbox"/> 06 TYPE B INT. OVEREXPOSURE <input type="checkbox"/> 07 TYPE B EXT. OVEREXPOSURE <input type="checkbox"/> 08 TYPE B RELEASE <input type="checkbox"/> 09 TYPE B LOSS OF FACILITY <input type="checkbox"/> 10 TYPE B PROPERTY DAMAGE 10 CFR 29.405 <input type="checkbox"/> 11 INTERNAL OVEREXPOSURE <input type="checkbox"/> 12 EXTERNAL OVEREXPOSURE <input type="checkbox"/> 13 EXCESSIVE RADIATION LEVELS <input type="checkbox"/> 14 EXCESSIVE CONCENTRATION LEVELS <input type="checkbox"/> 15 CRITICALITY <input type="checkbox"/> 16 LOSS OF THEFT <input type="checkbox"/> 17 CONTAMINATION <input type="checkbox"/> 18 UNSAFE OPERATION <input type="checkbox"/> 19 FIRE, EXPLOSION <input type="checkbox"/> 20 HUMAN (OPERATOR) ERROR <input type="checkbox"/> 21 COMPLAINT <input type="checkbox"/> 22 PUBLIC INTEREST <input type="checkbox"/> 23 LEAKING SOURCE <input type="checkbox"/> 24 TRANSPORTATION <input type="checkbox"/> 25 EXPIRED LICENSE <input type="checkbox"/> 26 EXPOSURE REPORTED AND FOUND INVALID. <input type="checkbox"/> 27 CONSTRUCTION/EQUIP. DEFICIENCY <input type="checkbox"/> 28 EQUIPMENT FAILURE <input type="checkbox"/> 29 EXCEED LIC/TECH SPEC REG'S <input type="checkbox"/> 30 DEPARTURE FROM PSAR/TS'S <input type="checkbox"/> 31 OTHER | | <input type="checkbox"/> 01 NO ACTION REQUIRED <input type="checkbox"/> 02 LETTER-CLEAR <input type="checkbox"/> 03 LETTER-NONCOMPLIANCE <input type="checkbox"/> 04 LETTER-SAFETY ITEM <input type="checkbox"/> 05 PART 2 NOTICE <input type="checkbox"/> 06 PART 2 NOTICE AS RESULT OF FOLLOWUP TO REGIONAL OFFICE LETTER <input type="checkbox"/> 07 ORDER <input type="checkbox"/> 08 REFER TO DRL FOR RESOLUTION <input type="checkbox"/> 09 REFER TO DRL FOR INFORMATION <input type="checkbox"/> 10 REFER TO DML FOR RESOLUTION <input type="checkbox"/> 11 REFER TO DML FOR INFORMATION <input type="checkbox"/> 12 REFER TO REGION TO CLOSE OUT <input type="checkbox"/> 13 OTHER | |
| O | REGIONAL OFFICE ACTION DATES | | REPORT SENT TO HEADQUARTERS NOV 09 1971 | | | |
| P | 591/LETTER ISSUED 11/09/71 | | | | DATE LETTER, NOTICE, ORDER ISSUED | |
| Q | <input checked="" type="checkbox"/> X REPLY NOT REQUIRED | | | | | |
| R | LICENSEE REPLY RECEIVED | | | | DATE LICENSEE REPLY RECEIVED | |
| S | REPLY INADEQUATE | | | | REPLY NOT REQUIRED | |

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