DUKE POWER GOMPANY

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HAL B. TUCKER VICE PRESIDENT NUCLEAR PRODUCTION

February 1, 1985

TELEPHONE (704) 373-4531

Mr. James P. O'Reilly, Regional Administrator U. S. Nuclear Regulatory Commission Region II 101 Marietta Street, NW, Suite 2900 Atlanta, Georgia 30323

Subject: Oconee Nuclear Station

IE Inspection Report

50-269/84-32 50-270/84-32 50-287/84-36

Dear Sir:

In response to your letter dated January 2, 1985, which transmitted the subject Inspection Report, the attached response to the cited item of non-compliance is provided. I declare under penalty of perjury that the statements set forth herein are true and correct to the best of my knowledge on February 1, 1985.

Very truly yours,

Hal B. Tucker

SGG:s1b

Attachment

cc: Mr. J. C. Bryant
NRC Resident Inspector
Oconee Nuclear Station

· Violation

Technical Specification 6.4.1 states that the station shall be operated and maintained in accordance with approved procedures with appropriate check-off lists and instructions.

Contrary to the above, documentation of completion of several steps was not totally completed in performance of the controlling procedure for unit startup, OP/3/A/1102/01, as performed November 16 - November 19, 1984, in that:

- a. Upon receipt of an oral report from Department Superintendents that all work necessary for startup was completed, the information was not entered in the supervisors log as required by Enclosure 4.1, step 1.1, of the procedure.
- b. Two of the several calculations to determine adequate shutdown margin required by Enclosure 4.1, step 2.1 and Enclosure 4.2, step 2.2, could not be located although they were signed off in the procedure and operators stated that the calculations were made.
- c. Though the procedure for withdrawing safety and regulating rods was followed correctly, a signoff sheet (Procedure OP/O/A/1105/09) was not completed as required by Enclosure 4.3, steps 2.3 and 2.5.

This is a Severity Level V violation (Supplement 1).

Response

Admission or denial of the alleged violation:

This violation is correct as stated.

2) Reasons for the violation:

The lack of documentation cited in Example A resulted from personnel error in not entering the information into the log book. Example B was the result of an inadequate administrative program covering the disposition of completed shutdown margin calculations. Example C resulted from an inadequate program to inform shift personnel of procedural changes, and from personnel error, inattention to details by an individual.

3) Corrective actions taken and results:

Management has emphasized the need for attention to detail in fulfilling all documentation requirements with appropriate Operations personnel, including the personnel involved in the examples cited. The inadequate administrative program noted in (2) above are being reviewed.

4) Corrective actions to be taken to avoid further violations:

Operations management will continue to emphasize proper documentation through inclusion in the initial and on-going training programs. After review is completed, the program covering disposition of completed shutdown margin calculations will be revised to ensure proper retention. Also, the program to notify Operations shift personnel of procedure changes and re-issues will be upgraded.

5) Date when full compliance will be achieved:

The revisions to the initial and on-going training programs noted in (4) above will be completed by February 1, 1985. The administrative program revisions noted in (4) above will be completed by April 1, 1985.