

50-213



CONNECTICUT YANKEE ATOMIC POWER COMPANY

HADDAM NECK PLANT
362 INJUN HOLLOW ROAD EAST HAMPTON, CT 06424-3099

March 12, 1998

CY-98-046

Mr. William D. Hegener
Oil and Chemical Spill Section
Department of Environmental Protection
79 Elm Street
Hartford, CT 06106-5127

Reference: Connecticut Yankee Atomic Power Company (CYAPCo)
Report of Film on Discharge Canal
Spill Report Dated March 12, 1998

Dear Mr. Hegener:

This letter is a follow-up to the verbal notification given to your office at 6:15 PM on March 11, 1998. A copy of the spill report is attached. //

An oil film was observed on March 11, 1998 in the discharge canal above the weir. Upon investigation, it was estimated that approximately 1 cup of oil was dispersed in the canal. The film is contained and will be absorbed by containment and sorbent booms that were already in place in the discharge canal.

An investigation into the cause of the film is continuing at this time. A similar film was reported to your office on February 12, 1998, February 19, 1998, and February 25, 1998. At this time, it is believed that these incidents are all related, and that the films that appear in the plant discharge canal and at the intake structure are the result of an intermittent release that is likely to be related to plant equipment or operations. Jez3

9803240241 980312
PDR ADOCK 05000213
S PDR



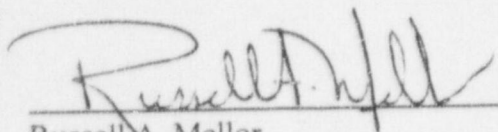
Mr. William D. Hegener
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When the source of the oil film is confirmed, CYAPCo will notify the CTDEP's Oil and Chemical Spill Section of its findings and any additional corrective actions. A written report will also be submitted to your office in mid-April which will describe our investigative work and findings in greater detail.

Should you have any questions, please call Ms. Patricia Zabrocki, Environmental Coordinator, at (860) 267-3183.

Very truly yours,

CONNECTICUT YANKEE ATOMIC POWER COMPANY



Russell A. Mellor
Vice President, Operations and Decommissioning

cc: Mr. Michael McCann, Oil and Chemical Response, CT DEP, Hartford CT
Nuclear Regulatory Commission (NRC), Washington, DC
Nuclear Regulatory Commission (NRC) Resident
U.S. Coast Guard Marine Safety Office (MSO), New Haven, CT
Ms. Michele DiNioa, Water Management Bureau, CT DEP, Hartford, CT



STATE OF CONNECTICUT
DEPARTMENT OF
ENVIRONMENTAL PROTECTION
79 Elm Street
Hartford, CT 06106

Bureau of Waste Management
Oil and Chemical Spill Response Division

REPORT OF PETROLEUM OR CHEMICAL PRODUCT DISCHARGE, SPILLAGE OR RELEASE

1. When did the incident occur? date 03 / 11 / 98 time 5:30 PM
month / day / year
2. Where did the incident occur? Connecticut Yankee Atomic Power Company (CYAPCo)
discharge canal above the weir.
3. How did the incident occur? (Describe the cause) The cause of the sheen is not
known at this time. CYAPCo is currently investigating plant operations
and equipment as possible sources.
4. Under whose control was the chemical or petroleum product at the time of the incident?
Name: The cause of the sheen is unknown at this time. The sheen was
Mailing address and street: discovered in CYAPCo's discharge canal.
Town: Haddam State: CT Zip: _____ Telephone: _____
5. Who is the owner of the property onto which the spill occurred?
CYAPCo
If this is a corporate property or property owned jointly who represents the owner?
Corporate property Property owned jointly
Name: Connecticut Yankee Atomic Power Company (Haddam Neck Plant)
Mailing address and street: 362 Injun Hollow Road
Town: East Hampton State: CT Zip: 06424 Telephone: _____

6. When was the incident verbally reported to the Department of Environmental Protection?

Date 03 / 11 / 98 time 6:15 PM.
month / day / year

7. Who reported the incident and who were they representing?

Name: R.A. Willis representing CYAPCo.

Mailing address and street: 362 Injun Hollow Road

Town: East Hampton State: CT Zip 06424 Telephone _____

8. What were the chemicals or petroleum products released, spilled or discharged? Give an exact description of each of the materials involved in the incident, including chemical names, percent concentrations, trade names, etc.

If the chemicals are Extremely Hazardous substances or CERCLA hazardous substances they must be identified as such and include the reportable quantity (RQ). Please attach a Material Safety Data Sheet (MSDS) for each chemical involved.

What were the quantities of chemicals that were released, spilled or discharged to each environmental medium (air, surface water, soil, groundwater)? [NOTE: Connecticut General Statutes requires the reporting of any amount of any substance or material released to the environment].

The source of the sheen is not known at this time. An investigation
of plant operations and equipment is continuing at the present time.
Approximately, 1 cup of oil is estimated to have been observed in the
discharge canal above the weir. This oil is of unknown origin, however,
the facility's equipment, located at the plant's water intake structure
is still being evaluated as the probable source. MSDS sheets for the
petroleum-based products which are considered possible sources,
were submitted to the CTDEP on February 25, 1998

9. Did any of the chemical travel beyond the property line? [NOTE: materials that enter the ground water are considered to have gone beyond the property line.]

The sheen was not observed outside CYAPCo's property boundary.

10. What actions were taken to respond to and contain the release, spill or discharge?

Containment and sorbent boom were already in place in the discharge canal
which contained and will absorb the oil.

11. What actions are being taken to prevent recurrence of an incident of this type?

CYAPCo is currently investigating the source of the sheen. As soon as
the source is confirmed, CYAPCo will notify CTDEP's Oil and Chemical Spill
Section of its findings and any additional corrective actions.

Attach additional sheets if necessary.

12. Were there any injuries as a result of the incident? If so, list the names of exposed individuals, their addresses, phone numbers and describe their injuries.

Name: No injuries occurred as a result of this incident.

Mailing address and street _____

Town: _____ State: _____ Zip _____ Telephone _____

Attach additional sheets if necessary.

13. What is the appropriate advice regarding medical attention necessary for exposed individuals?

No exposures resulted from this incident. MSDS sheets for the potential petroleum sources were previously provided to the CTDEP on February 25, 1998.

14. Are there any known or anticipated health risks, acute or chronic, associated with the release of this chemical or medical advice that should be communicated?

The source of the oil is unknown at this time. MSDS sheets for the possible petroleum sources will be consulted in the event of an exposure.

15. Was the incident completely cleaned up by the time this report was submitted? If not, what are the anticipated remedial actions and their duration?

Containment and sorbent boom were already in place when the sheen was observed. The sorbent boom will absorb the residual oil sheen.

16. CERTIFICATION. I hereby affirm that the foregoing statement is true to the best of my knowledge.

Environmental Coordinator 3/12/98

Signature	Title	Date
Patricia J. Zabrocki	(860) 267-3183	
Print Name	Telephone	

CYAPCo (Haddam Neck Plant)	362 Injun Hollow Road	East Hampton, CT	06424
Street Address/P.O. Box	City/Town	State	Zip

This form may be reproduced or computerized as long as it contains all of the information requested and is on an 8 1/2" x 11" white paper, black type format. For serious incidents the questions may be answered in a narrative format which must include the preparer's affidavit.

MAIL TO: State of Connecticut
Department of Environmental Protection
Bureau of Waste Management
Oil and Chemical Response Division
79 Elm Street
Hartford, CT 06106

Telephone: (860)424-3024 (Routine Calls)
(860)424-3338 (Emergency)

ATTACHMENT 12.5
STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
State Office Building Hartford, Connecticut 06115
REPORT OF PETROLEUM OR CHEMICAL PRODUCT DISCHARGE

The following information is submitted concerning petroleum or chemical product discharge reported verbally to the Department of Environmental Protection/State Police at CT (location)

on 3/11/95 at 1730 by R. A. Willis
(date) (time) (name)

1. Time and date of discharge, spillage, etc.
At approximately 1730 noticed oil sheen at discharge
canal

2. Location, to include name of town, river, highway, distance from intersection, etc., of the pollution or contamination.
Haddam Neck, CT, Conn. River

3. Type of oil, petroleum or chemical pollutant or contaminant.
Lubricating oil

4. Quantity of discharge, spillage, seepage, filtration.
< 1 cup

5. Cause of pollution or contamination:
a. Type of vessel, vehicle, containers, etc., which contained the pollutant or contaminant.

b. Describe in detail what actually occurred to cause discharge, spillage, seepage, filtration.
unknown origin of oil

ATTACHMENT 12.5

- c. If pollutant or contamination was a result of discharge, spillage, seepage, filtration from a moving vessel or vehicle, give location of department and destination.

6. Name and address of owner of ship, boat or other vessel, terminal, establishment, vehicle, trailer or machine causing such pollution or contamination.

Connecticut Yankee

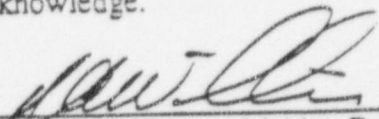
7. Name and address of person making this report

R.A. Willis, 14 Jun Hollow Rd, Haddam Neck, CT

8. Title, or relationship to owner, of person making report.

Sh. Pt Manager

All statements contained herein are true to the best of my knowledge.



Signature of Person Making Report

ATTACHMENT 12.0
 Connecticut Yankee Atomic Power Co.
 Haddam Neck Plant
 Hazardous Substance Spill Report

00120 (03/88) REV. 8

David Jeason

AREA OF PLANT SPILL OCCURRED Discharge Cond		COMPANY / LEPT. RESPONSIBLE CY		SPILL OCCURRED OR RECORDED <input checked="" type="checkbox"/>	DATE 3/11/98	TIME 1730
REPORT PREPARED BY R. A. Willis		EMPLOYEE REPORTING ON SITE N/A		PHONE 267-2556	EXT. 3214	
SUPERVISOR ON CALL R. A. Willis		EMPLOYEE REPORTING ON SITE N/A		SPILL REPORTED TO DISPATCHER <input checked="" type="checkbox"/>	DATE 3/11/98	TIME
1. SPILL LOCATION		2. EQUIPMENT, NUMBER/SIZE EACH UNIT		3. QUANTITY AND TYPE		
<input type="checkbox"/> STREET <input type="checkbox"/> PRIVATE PROPERTY <input checked="" type="checkbox"/> PLANT <input type="checkbox"/> SUBSTATION <input type="checkbox"/> RIGHT OF WAY <input type="checkbox"/> OTHER		<input type="checkbox"/> CONTAINER(S) _____ <input type="checkbox"/> VEHICLE(S) _____ <input type="checkbox"/> TANK _____ <input type="checkbox"/> OTHER _____		_____ GALLONS <input checked="" type="checkbox"/> OIL (TYPE) Lubricating <input type="checkbox"/> CHEMICAL (NAME) _____ <input type="checkbox"/> OTHER (NAME) _____		
TOWN Haddam Neck		STREET Winn Hollow Rd		NEAREST CROSS STREET Rock Landing Rd		
OTHER		4. MATERIAL HAS SPILLED ONTO		5. MATERIAL HAS SPILLED INTO		
<input type="checkbox"/> PAVEMENT <input type="checkbox"/> TREES <input type="checkbox"/> STRUCTURES <input type="checkbox"/> EARTH <input type="checkbox"/> FARM CROPS <input type="checkbox"/> VEHICLES <input type="checkbox"/> LAWN <input type="checkbox"/> FARM ANIMALS <input type="checkbox"/> PERSONS <input type="checkbox"/> SHRUBS / BRUSH <input checked="" type="checkbox"/> OTHER Discharge cond		<input type="checkbox"/> GUTTER, CATCH BASIN, OR STORM DRAIN <input type="checkbox"/> POTABLE WATER SUPPLY OR RESERVOIR (NAME) _____ <input checked="" type="checkbox"/> STREAM, RIVER, POND, OR LAKE (NAME) at River <input type="checkbox"/> OTHER _____ <input type="checkbox"/> NONE				
6. HAS SPILL BEEN CONTAINED? IF NO, DESCRIBE: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO						
7. SPILL CAUSE		8. SPILL EVENT		9. WEATHER		
<input type="checkbox"/> VEHICLE ACCIDENT <input type="checkbox"/> VANDALISM <input type="checkbox"/> STORM EVENT <input type="checkbox"/> CORROSION <input type="checkbox"/> EQUIP. FAILURE <input type="checkbox"/> HUMAN ERROR <input type="checkbox"/> OTHER UNKNOWN SOURCE		<input type="checkbox"/> TANK OR PIPING RUPTURE <input type="checkbox"/> GASKET / FITTING LEAK <input type="checkbox"/> ABOVE GROUND <input type="checkbox"/> GUNSHOT HOLE <input type="checkbox"/> BELOW GROUND <input type="checkbox"/> FIRE oil then <input type="checkbox"/> BURN OR CORROSION HOLE <input checked="" type="checkbox"/> OTHER Discharge Cond		<input checked="" type="checkbox"/> CLEAR <input type="checkbox"/> RAIN <input type="checkbox"/> SNOW / SLEET <input type="checkbox"/> HIGH WIND		
10. CLEAN-UP AND OTHER INFORMATION: oil from across discharge canal						
REPORTING REQUIREMENTS		DURING	CALL NO.	ORIGINAL CALL BY DISPATCHER	FOLLOW-UP CALL	
CONN	REPORT ALL SPILLS TO: DEPARTMENT OF ENVIRONMENTAL PROTECTION DEPARTMENT OF ENVIRONMENTAL PROTECTION	WEEK DAYS ALL HOURS	(860) 424-3377 (860) 424-3338	DATE 3/11/98 TIME 1710 Jim 209	DATE	TIME
	REPORT ALL SPILLS TO: DEPARTMENT OF ENVIRONMENTAL QUALITY ENG. STATE POLICE	OFFICE HOURS AFTER HOURS	(413) 785-5327 (617) 561-4500	DATE N/A	DATE	TIME
REGIONS	REPORT ALL SPILLS MEETING THE FEDERAL OR CY STAFF REPORTING CRITERIA BELOW TO:	ALL HOURS AFTER HOURS	(800) 424-8802 (413) 785-5260	DATE 3/11/98 TIME 1820	DATE	TIME
	1. U.S.C.G. NATIONAL RESPONSE CENTER ✓ 2. BRUSH HILL C.S.C. (AFTER HOURS EVENTS) 3. FUNCTIONAL STAFF DEPARTMENT ON-CALL REP.					
FEDERAL AND CONNECTICUT YANKEE REPORTING CRITERIA: ERG2 ENVIRONMENTAL REQUIREMENTS FOR RESPONDING TO RELEASES OF HAZARDOUS SUBSTANCES AND OIL						

427 867
CHRIS SAVAGE

Jim 209

