

50-263

NRC DISTRIBUTION FOR PART 50 DOCKET MATERIAL

FILE NUMBER

INCIDENT REPORT

TO:

Mr. J. G. Keppler

FROM:

Northern States Power Company
Minneapolis, Minnesota
L. O. Mayer

DATE OF DOCUMENT

12/10/76

DATE RECEIVED

12/13/76

☒ LETTER☐ NOTORIZED

PROP

INPUT FORM

☐ ORIGINAL☒ UNCLASSIFIED☒ COPY

NUMBER OF COPIES RECEIVED

One signed copy

DESCRIPTION

Ltr. trans the following:

PLANT NAME:

Monticello

(1-P)

ENCLOSURE

Licensee Event Report (RO 50-263/76-23) on
11/12/76 concerning Turbine Bypass Header
Drain Line leak.ACKNOWLEDGED
DO NOT REMOVE

(1-P)

NOTE: IF PERSONNEL EXPOSURE IS INVOLVED
SEND DIRECTLY TO KREGER/J. COLLINS

FOR ACTION/INFORMATION 12/14/76

RJL

<input checked="" type="checkbox"/> BRANCH CHIEF:	Ziemann
<input checked="" type="checkbox"/> W/3 CYS FOR ACTION	
<input checked="" type="checkbox"/> LIC. ASST.:	Diggs
<input checked="" type="checkbox"/> W/ CYS	
<input checked="" type="checkbox"/> ACRS 16 CYS HOLDING/SENT:	Car. B. (12/14/76)

INTERNAL DISTRIBUTION

<input checked="" type="checkbox"/> REG FILE	
<input checked="" type="checkbox"/> NRC PDR	
<input checked="" type="checkbox"/> I & E (2)	
<input checked="" type="checkbox"/> MIPC	
<input checked="" type="checkbox"/> SCHROEDER/IPPOLITO	
<input checked="" type="checkbox"/> HOUSTON	
<input checked="" type="checkbox"/> NOVAK/CHECK	
<input checked="" type="checkbox"/> GRIMES	
<input checked="" type="checkbox"/> CASE	
<input checked="" type="checkbox"/> BUTLER	
<input checked="" type="checkbox"/> HANAUER	
<input checked="" type="checkbox"/> TEDESCO/MACCARY	
<input checked="" type="checkbox"/> EISENHUT	
<input checked="" type="checkbox"/> BAER	
<input checked="" type="checkbox"/> SHAO	
<input checked="" type="checkbox"/> VOLLMER/BUNCH	
<input checked="" type="checkbox"/> KREGER/J. COLLINS	

EXTERNAL DISTRIBUTION

<input checked="" type="checkbox"/> LPDR: Minneapolis, Minn.	
<input checked="" type="checkbox"/> TIC:	
<input checked="" type="checkbox"/> NSIC:	

CONTROL NUMBER

12573

50-263
A.O.

NSP

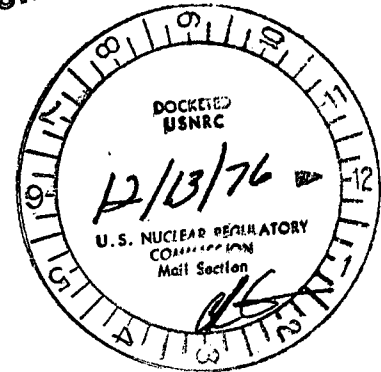
NORTHERN STATES POWER COMPANY

MINNEAPOLIS, MINNESOTA 55401

REGULATORY DOCKET FILE COPY

December 10, 1976

Mr J G Keppler, Director, Region III
Office of Inspection & Enforcement
U S Nuclear Regulatory Commission
799 Roosevelt Road
Glen Ellyn, IL 60137



Dear Mr Keppler:

MONTICELLO NUCLEAR GENERATING PLANT
Docket No. 50-263 License No. DPR-22

Turbine Bypass Header Drain Line Leak

The Licensee Event Report for this occurrence is reproduced on the back of this letter. Enclosed are 3 copies.

Yours very truly,

M H Voth/for

L O Mayer, PE
Manager of Nuclear Support Services

LOM/MHV/deb

cc: Director, IE, USNRC (30)
Director, MIPC, USNRC (3)
G Charnoff
MPCA
Attn: J W Ferman



12573

LICENSEE EVENT REPORT

CONTROL BLOCK:

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 1 6

[PLEASE PRINT ALL REQUIRED INFORMATION]

LICENSEE NAME										LICENSE NUMBER										LICENSE TYPE					EVENT TYPE	
01	M	N	M	N	P	1	0	0	-	0	0	0	0	0	-	0	0	4	1	1	1	1	0	3		
7	8	9				14	15									25	26					30	31	32		

CON'T		CATEGORY		REPORT TYPE	REPORT SOURCE	DOCKET NUMBER						EVENT DATE						REPORT DATE							
01				L	L	0	5	0	-	0	2	6	3	1	1	1	2	7	6	1	2	1	0	7	6
7	8	57	58	59	60	61							68	69					74	75					80

EVENT DESCRIPTION

EVENT DESCRIPTION		
02	While performing normal inspection of condenser area found 1" elbow leaking on	80
7	8	9
03	H P Turbine Bypass Header Drain Line. Two previous similar occurrences (M-RO-76-	80
7	8	9
04	01, M-RO-76-16). The elbow was repair welded. Investigation continuing to	80
7	8	9
05	determine if additional corrective action required. (M-RO-76-23)	80
7	8	9
06		80
7	8	9

PRIME

7	8	9					PRIME COMPONENT SUPPLIER	COMPONENT MANUFACTURER				VIOLATION				
SYSTEM CODE			CAUSE CODE		COMPONENT CODE											
0	7	H	B	F	P	I	P	E	X	X	A	Z	9	9	9	N
7	8	9	10	11	12					17	43	44			47	48

CAUSE DESCRIPTION

CAUSE DESCRIPTION			
08	7	8	9
Erosion of elbow wall caused by hot steam flashing after passing through an			
09	7	8	9
orifice. Failure elbow was a 1" 3000# (Sch 80) C.S. - A105.			
10	7	8	9
METHOD OF			

7 8 9		FACILITY STATUS		% POWER			OTHER STATUS		METHOD OF DISCOVERY		DISCOVERY DESCRIPTION	
1	1	D	0	0	0	NA	B	NA				
7	8	9	10	11	12	13	44	45	46	80		

7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60

FORM OF ACTIVITY RELEASED
Z

CONTENT OF RELEASE
Z

AMOUNT OF ACTIVITY
NA

LOCATION OF RELEASE
NA

PERSONNEL EXPOSURES

NUMBER			TYPE	DESCRIPTION
13	00	0	Z	NA

PERSONNEL INJURIES

PERSONNEL INFO										
NUMBER				DESCRIPTION						
1	4	0	0	0	NA					

OFFSITE CONSEQUENCES

1	5	NA	
7	8	9	80

LOSS OR DAMAGE TO FACILITY

TYPE			DESCRIPTION
16	2		NA

PUBLICITY

17	NA
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ADDITIONAL FACTORS

[illegible]

19
7 B 9 612/295-5151 8

NAME: J D McVay

612/295-5151
PHONE: _____