



LaSalle Station

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10 CFR 50.73

RA15-010

April 15, 2015

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, DC 20555-0001

LaSalle County Station, Unit 2
Facility Operating License No. NPF-18
NRC Docket No. 50-374

Subject: Licensee Event Report 2015-002-00, Two Main Steam Safety Relief
Valves Failed Inservice Inspection Pressure Test

In accordance with 10 CFR 50.73(a)(2)(i)(B), Exelon Generation Company (EGC), LLC,
is submitting Licensee Event Report Number 2015-002-00 for LaSalle County Station
Unit 2.

There are no regulatory commitments in this letter. Should you have any questions
concerning this report, please contact Mr. Guy V. Ford, Regulatory Assurance Manager,
at (815) 415-2800.

Respectfully,

A handwritten signature in black ink, appearing to read "Harold Vinyard".

Harold T. Vinyard
Plant Manager
LaSalle County Station

Enclosure: Licensee Event Report

cc: Regional Administrator – NRC Region III
NRC Senior Resident Inspector – LaSalle County Station



LICENSEE EVENT REPORT (LER)
(See Page 2 for required number of digits/characters for each block)

Estimated burden per response to comply with this mandatory collection request: 80 hours. Reported lessons learned are incorporated into the licensing process and fed back to industry. Send comments regarding burden estimate to the FOIA, Privacy and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0104), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

1. FACILITY NAME LaSalle County Station, Unit 2	2. DOCKET NUMBER 05000374	3. PAGE 1 OF 3
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4. TITLE
Two Main Steam Safety Relief Valves Failed Inservice Lift Inspection Pressure Test

5. EVENT DATE			6. LER NUMBER			7. REPORT DATE			8. OTHER FACILITIES INVOLVED	
MONTH	DAY	YEAR	YEAR	SEQUENTIAL NUMBER	REV NO.	MONTH	DAY	YEAR	FACILITY NAME	DOCKET NUMBER
02	14	2015	2015	002	00	04	15	2015	N/A	N/A
									FACILITY NAME	DOCKET NUMBER
									N/A	N/A

9. OPERATING MODE	11. THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR §: (Check all that apply)			
5	<input type="checkbox"/> 20.2201(b)	<input type="checkbox"/> 20.2203(a)(3)(i)	<input type="checkbox"/> 50.73(a)(2)(i)(C)	<input type="checkbox"/> 50.73(a)(2)(vii)
	<input type="checkbox"/> 20.2201(d)	<input type="checkbox"/> 20.2203(a)(3)(ii)	<input type="checkbox"/> 50.73(a)(2)(ii)(A)	<input type="checkbox"/> 50.73(a)(2)(vii)(A)
	<input type="checkbox"/> 20.2203(a)(1)	<input type="checkbox"/> 20.2203(a)(4)	<input type="checkbox"/> 50.73(a)(2)(ii)(B)	<input type="checkbox"/> 50.73(a)(2)(viii)(B)
	<input type="checkbox"/> 20.2203(a)(2)(i)	<input type="checkbox"/> 50.36(c)(1)(i)(A)	<input type="checkbox"/> 50.73(a)(2)(iii)	<input type="checkbox"/> 50.73(a)(2)(ix)(A)
10. POWER LEVEL	<input type="checkbox"/> 20.2203(a)(2)(ii)	<input type="checkbox"/> 50.36(c)(1)(ii)(A)	<input type="checkbox"/> 50.73(a)(2)(iv)(A)	<input type="checkbox"/> 50.73(a)(2)(x)
	<input type="checkbox"/> 20.2203(a)(2)(iii)	<input type="checkbox"/> 50.36(c)(2)	<input type="checkbox"/> 50.73(a)(2)(v)(A)	<input type="checkbox"/> 73.71(a)(4)
	<input type="checkbox"/> 20.2203(a)(2)(iv)	<input type="checkbox"/> 50.46(a)(3)(ii)	<input type="checkbox"/> 50.73(a)(2)(v)(B)	<input type="checkbox"/> 73.71(a)(5)
	<input type="checkbox"/> 20.2203(a)(2)(v)	<input type="checkbox"/> 50.73(a)(2)(i)(A)	<input type="checkbox"/> 50.73(a)(2)(v)(C)	<input type="checkbox"/> OTHER
	<input type="checkbox"/> 20.2203(a)(2)(vi)	<input checked="" type="checkbox"/> 50.73(a)(2)(i)(B)	<input type="checkbox"/> 50.73(a)(2)(v)(D)	Specify in Abstract below or in NRC Form 366A

12. LICENSEE CONTACT FOR THIS LER

LICENSEE CONTACT Andrew Schierer, Programs Engineering Manager	TELEPHONE NUMBER (Include Area Code) 815-415-3846
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13. COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT

CAUSE	SYSTEM	COMPONENT	MANU-FACTURER	REPORTABLE TO EPIX	CAUSE	SYSTEM	COMPONENT	MANU-FACTURER	REPORTABLE TO EPIX

14. SUPPLEMENTAL REPORT EXPECTED	15. EXPECTED SUBMISSION DATE
<input checked="" type="checkbox"/> YES (If yes, complete 15. EXPECTED SUBMISSION DATE) <input type="checkbox"/> NO	MONTH: 07 DAY: 17 YEAR: 2015

ABSTRACT (Limit to 1400 spaces, i.e., approximately 15 single-spaced typewritten lines)

During the February 2015 Unit 2 refueling outage L2R15, two main steam safety relief valves (SRV) did not pass Technical Specification Surveillance Requirement 3.4.4.1 and Inservice Testing Program lift pressure requirements. Both SRVs lifted below their expected lift pressures. SRV 2B21-F013S was required to lift within plus or minus three percent of 1150 psi (i.e., 1150 psi plus or minus 34.5 psi) and actually lifted at 1099 psi. SRV 2B21-F013M was required to lift within plus or minus three percent of 1195 psi (i.e., 1195 psi plus or minus 35.8 psi) and actually lifted at 1145 psi.

Both SRVs were replaced during the outage. The cause of the event is under review by the vendor testing laboratory, and will be reported in a supplement to this LER upon completion.



**LICENSEE EVENT REPORT (LER)
CONTINUATION SHEET**

Estimated burden per response to comply with this mandatory collection request: 80 hours. Reported lessons learned are incorporated into the licensing process and fed back to industry. Send comments regarding burden estimate to the FOIA, Privacy and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0104), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

1. FACILITY NAME	2. DOCKET	6. LER NUMBER			3. PAGE		
LaSalle County Station, Unit 2	05000374	YEAR	SEQUENTIAL NUMBER	REV NO.	2	OF	3
		2015	- 002	- 00			

NARRATIVE

LaSalle County Station Unit 2 is a General Electric Company Boiling Water Reactor with 3546 Megawatts Rated Core Thermal Power.

A. CONDITION PRIOR TO EVENT:

Unit(s): 2 Event Date: February 14, 2015 Event Time: 1530 CST
 Reactor Mode(s): 5 Mode(s) Name: Refueling Power Level: 0%

B. DESCRIPTION OF EVENT:

During the February 2015 Unit 2 refueling outage L2R15, two main steam safety relief valves (SRV)[AD] did not pass Technical Specification (TS) Surveillance Requirement 3.4.4.1 and Inservice Testing Program lift pressure requirements. Both SRVs lifted below their expected lift pressures. SRV 2B21-F013S was required to lift within plus or minus three percent of 1150 psi (i.e., 1150 psi plus or minus 34.5 psi), but actually lifted at 1099 psi. SRV 2B21-F013M was required to lift within plus or minus three percent of 1195 psi (i.e., 1195 psi plus or minus 35.8 psi), but actually lifted at 1145 psi.

This condition was discovered while Unit 2 was outside the mode of applicability for TS 3.4.4, Safety/Relief Valves (Modes 1, 2 and 3); however, multiple test failures are reportable under 10 CFR 50.73(a)(2)(i)(B) as an operation or condition prohibited by the plant's Technical Specifications.

C. CAUSE OF EVENT:

The cause of the event is under review by the testing facility vendor and will be reported in a supplement to this LER upon completion.

D. SAFETY ANALYSIS:

The safety significance of this condition was minimal. The out-of-tolerance lift pressures were discovered while the plant was in Mode 5 during a refueling outage and the SRVs were not required to be operable. Both SRVs lifted prior to their expected lift pressures, which is conservative in regards to maintaining reactor pressure vessel overpressure limits.

The cause of the event is under review by the vendor testing facility. Upon completion of the review, the cause will be evaluated for any potential safety concerns and will be reported in a supplement to this LER.

**LICENSEE EVENT REPORT (LER)
CONTINUATION SHEET**

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		2015	- 002	- 00			

NARRATIVE

E. CORRECTIVE ACTIONS:

- Both SRVs were replaced during the outage.
- The cause of the event was placed under review by the vendor testing laboratory.

F. PREVIOUS OCCURRENCES:

A review of past events identified no reportable occurrences of out-of-tolerance safety relief valve pressures in the previous ten years.

G. COMPONENT FAILURE DATA:

Crosby Safety Relief Valves for Main Steam Service, Style HB-65-BP, Size 6R10. ASME Section III, Class I