NRC FORM 195 (2-76)

U.S. NUCLEAR REGULATORY COMMISSION

NRC DISTRIBUTION FOR PART 50 DOCKET MATERIAL

DOCKET NUMBER	50-315
FILE NUMBER	INCIDENT REPORT
DATE OF DOCUMENT	11/30/76
DATE RECEIVED	12/2/76
NUMBER OF COPIES RECEIVED	One signed copy

TO: Mr. J. G. Keppler

FROM: Indiana & Michigan Power Company, Bridgman, Michigan, R. W. Jurgensen

☒ LETTER ☐ ORIGINAL ☒ COPY ☐ NOTORIZED ☒ UNCLASSIFIED

PROP

INPUT FORM

DESCRIPTION: Ltr. trans the following:

ACKNOWLEDGED

Do Not Remove

PLANT NAME: Cook Unit No. 1

(1-P)

ENCLOSURE:

Licensee Event Report (RO 50-315/76-48) on 11/1/76 concerning valve IMO-316, RHR inspection to cold legs 1 & 4 not cycling during surveillance testing.
(RO 50-315/76-49) on 10/30/76 concerning the discovering of RMS-2, containment area monitor setting exceeding tech spec limit.
(RO 50-315/76-50) on 11/6/76 concerning the tape sticking during the readout on #4 monitor tape, during the performance of a surveillance test.
(RO 50-315/76-51) on 11/7/76 concerning an abnormal alarm being received on the east containment spray pump, during normal operation.

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

(6-P)

FOR ACTION/INFORMATION 12/3/76 RJL

☒	BRANCH CHIEF:	Ziemann	
	W/3 CYS FOR ACTION		
☒	LIC. ASST.:	Diggs	
	W/ CYS		
☒	ACRS 16 CYS ~~HOLDING~~/SENT TO ~~LA~~ Cat. B. (12/3/76)		

INTERNAL DISTRIBUTION

☒	REG FILE		
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☒	I & E (2)		
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☒	CASE		
☒	BUTLER		
☒	HANAUER		
☒	TEDESCO/MACCARY		
☒	EISENHUT		
☒	BAER		
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☒	VOLLMER/BUNCH		
☒	KREGER/J. COLLINS		

EXTERNAL DISTRIBUTION

☒	LPDR: St. Joseph, Mich.		
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CONTROL NUMBER: 12194

NRC FORM 195 (2-76)

American Electric Power System
INDIANA & MICHIGAN POWER COMPANY
DONALD C. COOK NUCLEAR PLANT
P.O. Box 458, Bridgman, Michigan 49106

November 30, 1976

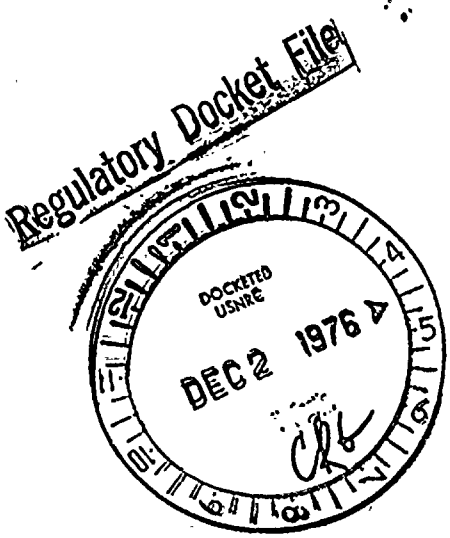
Mr. J. G. Keppler, Regional Director
Office of Inspection and Enforcement
United States Nuclear Regulatory Commission
Region III
799 Roosevelt Road
Glen Ellyn, IL 60137

Operating License DPR-58
Docket No. 50-315

Dear Mr. Keppler:

Pursuant to the requirements of Appendix A Technical Specifications and the United States Nuclear Regulatory Commission Regulatory Guide 1.16, Revision 4, Section 2.b, the following reports are submitted:

RO 50-315/76-48
RO 50-315/76-49
RO 50-315/76-50
RO 50-315/76-51



Sincerely,

for R. W. Jurgensen
Plant Manager

/mj

cc: R. S. Hunter
J. E. Dolan
G. E. Lien
R. Kilburn
R. J. Vollen BPI
R. C. Callen MPSC
K. R. Baker RO: III
R. Walsh, Esq.
P. W. Steketee, Esq.
G. Charnoff, Esq.
G. Olson
J. M. Hennigan
PNSRC
R. S. Keith
Dir., IE (30 copies)
Dir., MIPC (3 copies)

12194

Form No. 4494

LICENSEE EVENT REPORT

CONTROL BLOCK: [ ] (1–6)

(PLEASE PRINT ALL REQUIRED INFORMATION)

	LICENSEE NAME	LICENSE NUMBER	LICENSE TYPE	EVENT TYPE
01	MIDCC1 (7–8, 9–14)	00–00000–00 (15–25)	4111 1 (26–30)	03 (31–32)

	CATEGORY	REPORT TYPE	REPORT SOURCE	DOCKET NUMBER	EVENT DATE	REPORT DATE
01 CON'T	(57–58)	L (59)	L (60)	050–0315 (61–68)	110176 (69–74)	112976 (75–80)

EVENT DESCRIPTION

02 During surveillance testing, valve IMO-316, RHR Injection to cold legs 1 and 4 would
03 not cycle. The packing gland was backed off and the stem gear cleaned to reduce the
04 amount of torque required to operate the valve. The valve then operated properly.
05
06 (RO-50-315/76-48)

	SYSTEM CODE	CAUSE CODE	COMPONENT CODE	PRIME COMPONENT SUPPLIER	COMPONENT MANUFACTURER	VIOLATION
07	SF (9–10)	e (11)	VALVEX (12–17)	N (43)	L300 (44–47)	N (48)

CAUSE DESCRIPTION

08 The Limitorque operator failed to operate the valve because the valve packing gland
09 was too tight. There have been no previous problems with the packing on this valve
10 or similar valves in this system.

	FACILITY STATUS	% POWER	OTHER STATUS	METHOD OF DISCOVERY	DISCOVERY DESCRIPTION
11	E (9)	100 (10–12)	N/A (13–44)	b (45)	Surveillance Testing (46–80)

	FORM OF ACTIVITY RELEASED	CONTENT OF RELEASE	AMOUNT OF ACTIVITY	LOCATION OF RELEASE
12	Z (9)	Z (10)	N/A (11–44)	N/A (45–80)

PERSONNEL EXPOSURES

	NUMBER	TYPE	DESCRIPTION
13	000 (9–11)	Z (12)	N/A (13–80)

PERSONNEL INJURIES

	NUMBER	DESCRIPTION
14	000 (9–11)	N/A (12–80)

OFFSITE CONSEQUENCES

15 N/A

LOSS OR DAMAGE TO FACILITY

	TYPE	DESCRIPTION
16	Z (9)	N/A (10–80)

PUBLICITY

17 N/A

ADDITIONAL FACTORS

18 N/A

19

NAME: D. G. Wizner PHONE: 465-5901

GPO 881-667

LICENSEE EVENT REPORT

CONTROL BLOCK: [ ] (1–8) (PLEASE PRINT ALL REQUIRED INFORMATION)

	LICENSEE NAME	LICENSE NUMBER	LICENSE TYPE	EVENT TYPE
01	MIDCCI	00–00000–00	4111	03
(7–8 / 9–14 / 15–25 / 26–30 / 31–32)				

	CATEGORY	REPORT TYPE	REPORT SOURCE	DOCKET NUMBER	EVENT DATE	REPORT DATE
01 CONT		L	L	050–0315	103076	112976
(7–8)	(57–58)	(59)	(60)	(61–68)	(69–74)	(75–80)

EVENT DESCRIPTION

02 ON OCTOBER 29, 1976 WHILE PERFORMING CONTAINMENT RMS TRIP SETPOINT ADJUSTMENT
03 PROCEDURE IT WAS DISCOVERED THAT RMS-2, CONTAINMENT AREA MONITOR SETTING WAS
04 3.38 TIMES BACKGROUND AND RMS-11, CONTAINMENT ATMOSPHERE PARTICULATE MONITOR
05 SETTING WAS 5.84 TIMES BACKGROUND. TECHNICAL SPECIFICATIONS NO. 3.3.3.1 SPECIFIES
06 THESE ALARM/TRIP SETPOINTS (SEE SUPPLEMENT) (RO-50-315/76-49)

	SYSTEM CODE	CAUSE CODE	COMPONENT CODE	PRIME COMPONENT SUPPLIER	COMPONENT MANUFACTURER	VIOLATION
07	BB	A	ZZZZZZ	Z	ZZZZ	Y
(7–8 / 9–10 / 11 / 12–17 / 43 / 44–47 / 48)						

CAUSE DESCRIPTION

08 AN AVERAGE VALUE FOR THE BACKGROUND READING WAS ESTABLISHED AS REQUIRED BY THE
09 PROCEDURE BUT THE OPERATOR FAILED TO LOWER THE SETPOINT TO THE TWO TIMES
10 BACKGROUND VALUE DUE TO THE METER READING OSCILLATING (SEE SUPPLEMENT)

	FACILITY STATUS	% POWER	OTHER STATUS	METHOD OF DISCOVERY	DISCOVERY DESCRIPTION
11	E	100	NA	B	CONDUCTING SURVEILLANCE PROCEDURES
(7–8 / 9 / 10–12 / 13–44 / 45 / 46–80)					

	FORM OF ACTIVITY RELEASED	CONTENT OF RELEASE	AMOUNT OF ACTIVITY	LOCATION OF RELEASE
12	Z	Z	NA	NA
(7–8 / 9 / 10 / 11–44 / 45–80)				

PERSONNEL EXPOSURES

	NUMBER	TYPE	DESCRIPTION
13	000	Z	NA
(7–8 / 9–11 / 12 / 13–80)			

PERSONNEL INJURIES

	NUMBER	DESCRIPTION
14	000	NA
(7–8 / 9–11 / 12–80)		

PROBABEE CONSEQUENCES

15 NA

LOSS OR DAMAGE TO FACILITY

	TYPE	DESCRIPTION
16	Z	NA
(7–8 / 9 / 10–80)		

PUBLICITY

17 NA

ADDITIONAL FACTORS

18 THE IMPORTANCE OF PROPER ALARM/TRIP SETPOINTS AND THE PROPER EXECUTION OF THE SET-
19 POINT ADJUSTMENT PROCEDURE HAS BEEN REVIEWED THOROUGHLY WITH THE INDIVIDUAL INVOLVED.

NAME: D. C. Shearer PHONE: 465-5901

GPO 881-867

SUPPLEMENT TO REPORTABLE OCCURRENCE RO-50-315/76-49

SUPPLEMENT TO EVENT DESCRIPTION

TO BE SET AT EQUALS TO OR LESS THAN 2 TIMES BACKGROUND. THIS CONDITION HAD EXISTED SINCE OCTOBER 23, 1976.

SUPPLEMENT TO CAUSE DESCRIPTION

HIGH WHICH WOULD HAVE CAUSED INTERMITTENT HIGH ALARMS.

LICENSEE EVENT REPORT

CONTROL BLOCK: [ ] (1–6) — PLEASE PRINT ALL REQUIRED INFORMATION

	LICENSEE NAME	LICENSE NUMBER	LICENSE TYPE	EVENT TYPE
01	MIDCC1 (7–14)	00-000-00 (15–25)	4111 (26–30)	03 (31–32)

	CATEGORY	REPORT TYPE	REPORT SOURCE	DOCKET NUMBER	EVENT DATE	REPORT DATE
01 CON'T	(57–58)	L (59)	L (60)	050-0315 (61–68)	110676 (69–74)	112916 (75–80)

EVENT DESCRIPTION

02 WHILE IN MODE 1 AT 86 PERCENT POWER, DURING THE PERFORMANCE OF A SURVEILLANCE TEST ON
03 THE SEISMIC MONITORING SYSTEM, DURING THE READOUT ON #4 MONITOR TAPE, THE TAPE WAS
04 STICKING.
05
06 (RO-50-315/76-50)

	SYSTEM CODE	CAUSE CODE	COMPONENT CODE	PRIME COMPONENT SUPPLIER	COMPONENT MANUFACTURER	VIOLATION
07	IF (10)	B (11)	INSTRU (12–17)	N (43)	W120 (44–47)	N (48)

CAUSE DESCRIPTION

08 THE CASSETTE TAPE, MANUFACTURERED BY KINEMETRICS, WAS REMOVED AND DISPOSED OF. NO EVENT
09 HAD OCCURRED BETWEEN CALIBRATION SEQUENCES, AS VERIFIED BY THE OTHER TAPES. THEREFORE,
10 NO DATA WAS LOST DUE TO THE BAD TAPE. SPARE TAPES ON HAND WERE (SEE SUPPLEMENT)

	FACILITY STATUS	% POWER	OTHER STATUS	METHOD OF DISCOVERY	DISCOVERY DESCRIPTION
11	E (9)	086 (10–12)	NA (13–44)	B (45)	SURVEILLANCE TEST (46–80)

	FORM OF ACTIVITY RELEASED	CONTENT OF RELEASE	AMOUNT OF ACTIVITY	LOCATION OF RELEASE
12	Z (9)	Z (10)	NA (11–44)	NA (45–80)

PERSONNEL EXPOSURES

	NUMBER	TYPE	DESCRIPTION
13	000 (9–11)	Z (12)	NA (13–80)

PERSONNEL INJURIES

	NUMBER	DESCRIPTION
14	000 (9–11)	NA (12–80)

PROBABLE CONSEQUENCES

15 NA

LOSS OR DAMAGE TO FACILITY

	TYPE	DESCRIPTION
16	Z (9)	NA (10–80)

PUBLICITY

17 NA

ADDITIONAL FACTORS

18 NA

19 NA

NAME: J.L.RISCHLING PHONE: (616)465-5901(368)

GPO 881-667

SUPPLEMENT TO REPORTABLE OCCURRENCE RO-50-315/76-50

SUPPLEMENT TO CAUSE DESCRIPTION

CHECKED IN THE RECORDER WITH NO OTHER MALFUNCTIONS. A REPRESENTATIVE FROM KINEMETRICS HAS PERFORMED THE SEMI-ANNUAL CHECKS ON THE SEISMIC MONITORING SYSTEM, WITH ALL INSTRUMENTS FUNCTIONING PROPERLY.

Form No. 4484

LICENSEE EVENT REPORT

CONTROL BLOCK: [ ] (1–6)

(PLEASE PRINT ALL REQUIRED INFORMATION)

	LICENSEE NAME	LICENSE NUMBER	LICENSE TYPE	EVENT TYPE
01	MIDCC1	00–00000–00	4111	03
(7–8)	(9–14)	(15–25)	(26–30)	(31–32)

	CATEGORY	REPORT TYPE	REPORT SOURCE	DOCKET NUMBER	EVENT DATE	REPORT DATE
01 CONT		L	L	05000315	110776	112976
(7–8)	(57–58)	(59)	(60)	(61–68)	(69–74)	(75–80)

EVENT DESCRIPTION

02 During normal operation, an abnormal alarm was received on the east containment spray
03 pump. An attempt to close the breaker in test position failed. The spring was dis-
04 charged and recharged and the breaker functioned properly with no further alarms. Sub-
05 sequent inspection and test of the breaker revealed everything satisfactory.
06 (RO 50-315/76-51)

	SYSTEM CODE	CAUSE CODE	COMPONENT CODE	PRIME COMPONENT SUPPLIER	COMPONENT MANUFACTURER	VIOLATION
07	SB	F	CKTBRK	L	I005	N
(7–8)	(8–10)	(11)	(12–17)	(43)	(44–47)	(48)

CAUSE DESCRIPTION

08 Although there are a number of possible causes for this condition, the most likely
09 cause is that a contact in the control circuit did not close. Subsequent operations of
10 the breaker while troubleshooting did not reveal a cause for failure.

	FACILITY STATUS	% POWER	OTHER STATUS	METHOD OF DISCOVERY	DISCOVERY DESCRIPTION
11	E	100	N/A	a	N/A
(7–8)	(9)	(10–12)	(13–44)	(45)	(46–80)

	FORM OF ACTIVITY RELEASED	CONTENT OF RELEASE	AMOUNT OF ACTIVITY	LOCATION OF RELEASE
12	Z	Z	N/A	N/A
(7–8)	(9)	(10)	(11–44)	(45–80)

PERSONNEL EXPOSURES

	NUMBER	TYPE	DESCRIPTION
13	000	Z	N/A
(7–8)	(9–11)	(12)	(13–80)

PERSONNEL INJURIES

	NUMBER	DESCRIPTION
14	000	N/A
(7–8)	(9–11)	(12–80)

OFFSITE CONSEQUENCES

15 N/A

LOSS OR DAMAGE TO FACILITY

	TYPE	DESCRIPTION
16	Z	N/A
(7–8)	(9)	(10–80)

PUBLICITY

17 N/A

ADDITIONAL FACTORS

18 N/A

19

NAME: David G. Wizner PHONE: 465-5901