

NRC DISTRIBUTION FOR PART 50 DOCKET MATERIAL

FILE NUMBER
INCIDENT REPORT

TO:

Mr. J. G. Keppler

FROM:

Indiana & Michigan Power Co.
Bridgman, Michigan
R. W. Jurgensen

DATE OF DOCUMENT

8/26/76

DATE RECEIVED

9/28/76

☒ LETTER☐ NOTORIZED

PROP

INPUT FORM

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One signed

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DESCRIPTION

Ltr. trans the following:

ACKNOWLEDGED

COPIES DESTROYED

(1-P)

PLANT NAME:

Cook Unit #1

ENCLOSURE

Licensee Event Report (RO 50-315/76-34) on
8/6/76 concerning the axial power distribution
monitoring system being made inoperable for
conduct of maintenance in the containment
instrument room.(RO 50-315/76-35) on 8/6/76 concerning the
turbine driven auxillary feed pump trip and
trottle valve tripping without giving an alarm
(4-P) in the control room.NOTE: IF PERSONNEL EXPOSURE IS INVOLVED
SEND DIRECTLY TO KREGER/J. COLLINS

FOR ACTION/INFORMATION 9/28/76

RJL

☒ BRANCH CHIEF:

Ziemann

☐ W/3 CYS FOR ACTION☒ LIC. ASST.:

Diggs

☐ W/1 CYS☐ ACRS 16 CYS HOLDING/SENT TO LA

INTERNAL DISTRIBUTION

☒ REG FILE☒ NRC PDR☒ I & E (2)☒ MIPC☒ SCHROEDER/IPPOLITO☒ HOUSTON☒ NOVAK/CHECK☒ GRIMES☒ CASE☒ BUTLER☒ HANAUER☒ TEDESCO/MACCARY☒ EISENHUT☒ BAER☒ SHAO☒ VOLLMER/BUNCH☒ KREGER/J. COLLINS

EXTERNAL DISTRIBUTION

☒ LPDR: St. Joseph, Mi.☒ TIC:☒ NSIC:

CONTROL NUMBER

9822

78

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ACK



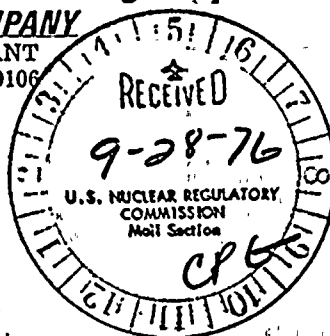
INDIANA & MICHIGAN POWER COMPANY

DONALD C. COOK NUCLEAR PLANT
P.O. Box 458, Bridgman, Michigan 49106

Regulatory

File, Cy:

August 26, 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 50-315/76-34
RO 50-315/76-35

Sincerely,

R.W. Jurgensen
Plant Manager

/bab

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
P.W. Stoketee, Esq.
R. Walsh, Esq.
G. Charnoff, Esq.
G. Olson
J.M. Hennigan
PNSRC
R.S. Keith
Dir., IE (30 copies)
Dir., MIPC (3 copies)

9822

AUG 30 1976



LICENSEE EVENT REPORT

CONTROL BLOCK:

1					6

[PLEASE PRINT ALL REQUIRED INFORMATION]

LICENSEE NAME					LICENSE NUMBER										LICENSE TYPE					EVENT TYPE					
01	M	I	D	C	C	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

CATEGORY		REPORT TYPE	REPORT SOURCE	DOCKET NUMBER						EVENT DATE					REPORT DATE								
01	CONT		L	0	5	0	-	0	3	1	5	0	8	0	6	7	6	0	8	2	4	7	6
57	58	59	60	61							68	69					74	75					80

EVENT DESCRIPTION

02	UNIT IN MODE 1. THE AXIAL POWER DISTRIBUTION MONITORING SYSTEM (APDMS) WAS MADE	7	8	9	80
03	INOPERABLE FOR CONDUCT OF MAINTENANCE IN THE CONTAINMENT INSTRUMENT ROOM. WITH APDMS	7	8	9	80
04	INOPERABLE, A SCAN USING MOVEABLE INCORE DETECTORS IS REQUIRED ONCE PER 8 HOURS. THIS	7	8	9	80
05	SCAN WAS NOT CONDUCTED FOR 14 HOURS AND 21 MINUTES IN VIOLATION OF APPENDIX A	7	8	9	80
06	TECHNICAL SPECIFICATION SECTION 4.2.6.1.b.1. (RO 50-315/76-34)	7	8	9	80

SYSTEM CODE		CAUSE CODE	COMPONENT CODE					POWER COMPONENT SUPPLIER	COMPONENT MANUFACTURER			VIOLATION	
07	I D	A	Z	Z	Z	Z	Z	Z	Z	9	9	9	Y
7	8 9 10	11	12				17	43	44			47	48

CAUSE DESCRIPTION

08	APDMS WAS MADE INOPERABLE TO PREVENT DETECTORS FROM PULLING BACK INTO INSTRUMENT ROOM	80
09	AND CREATING HIGH RADIATION AREA WHILE PERSONNEL WERE IN THE ROOM.	80
10	(SEE SUPPLEMENT)	80

11		FACILITY STATUS		E		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		61		62		63		64		65		66		67		68		69		70		71		72		73		74		75		76		77		78		79		80	
11		FACILITY STATUS		E		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		61		62		63		64		65		66		67		68		69		70		71		72		73		74		75		76		77		78		79		80	
11		FACILITY STATUS		E		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		61		62		63		64		65		66		67		68		69		70		71		72		73		74		75		76		77		78		79		80	
11		FACILITY STATUS		E		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		61		62		63		64		65		66		67		68		69		70		71		72		73		74		75		76		77		78		79		80	
11		FACILITY STATUS		E		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		61		62		63		64		65																															

PERSONNEL EXPOSURES

NUMBER			TYPE	DESCRIPTION
13	0	0	0	NA

PERSONNEL INJURIES

NUMBER			DESCRIPTION
14	000		NA

PROBABLE CONSEQUENCES - NONE - PLACED APDMS IN SERVICE AND CONDUCTED SCAN AT 1715 HOURS
 15 ON 8-06-76. F7 WAS WITHIN ALLOWABLE SPECIFICATIONS.

LOSS OR DAMAGE TO FACILITY

TYPE			DESCRIPTION
16	Z		NA

PUBLICITY

17	NA
7 8 9	80

ADDITIONAL FACTORS

18	NA		
7	8	9	80

19 7 8 9 80

NAME: R.S. LEASE

PHONE: 616-465-5901

SUPPLEMENT TO REPORTABLE OCCURRENCE RO-50-315/76-34

CAUSE DESCRIPTION

ADDITIONAL MAINTENANCE ACTIVITY REQUIRED APDMS BEING INOPERABLE LONGER THAN ORIGINALLY PLANNED AND RESULTED IN SCAN NOT BEING CONDUCTED IN REQUIRED TIME FRAME.

TO PREVENT RECURRENCE, SUPERVISORY PERSONNEL HAVE BEEN INSTRUCTED TO REVIEW WORK WHICH REQUIRES APDMS TO BE ISOLATED TO INSURE WORK CAN BE COMPLETED IN REQUIRED TIME AND, IF ADDITIONAL WORK IS REQUIRED, THAT IT IS NOT STARTED UNTIL REVIEWED WITH OPERATING PERSONNEL. OPERATING PERSONNEL HAVE BEEN INSTRUCTED TO REVIEW APDMS RECORDS TO DETERMINE IF PLANNED OR ADDITIONAL WORK CAN BE COMPLETED BEFORE NEXT SCHEDULED SCAN IS DUE. IF WORK CANNOT BE COMPLETED BEFORE NEXT SCHEDULED SCAN IS DUE, A MANUAL SCAN IS TO BE CONDUCTED PRIOR TO START OF WORK AND, IF REQUIRED, WORK WILL BE STOPPED AND A SCAN CONDUCTED WITHIN THE REQUIRED TIME FRAME.

LICENSEE EVENT REPORT

CONTROL BLOCK:

[PLEASE PRINT ALL REQUIRED INFORMATION]

LICENSEE NAME														LICENSE NUMBER										LICENSE TYPE					EVENT TYPE	
01	M	I	D	C	C	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						
01		CONT		CATEGORY		REPORT TYPE	REPORT SOURCE	DOCKET NUMBER								EVENT DATE				REPORT DATE										
01						L	L	0	5	0	-	0	3	1	5	0	8	0	6	7	6	0	8	2	6	7	6			
7	8	57	58	59	60		61							68	69					74	75					80				

EVENT DESCRIPTION

02	WHILE IN MODE 1 AT 100 PERCENT POWER, DURING A SURVEILLANCE TEST IT WAS FOUND THAT THE	80
7 8 9		
03	TURBINE DRIVEN AUXILIARY FEED PUMP TRIP AND THROTTLE VALVE TRIPPED WITHOUT GIVING AN	80
7 8 9		
04	ALARM IN THE CONTROL ROOM. AFTER RESETTNG OF TURBINE TRIP ASSEMBLY, IT WAS THEN FOUND	80
7 8 9		
05	THE TURBINE COULD NOT BE TRIPPED FROM THE CONTROL ROOM. APPENDIX A TECHNICAL	80
7 8 9		
06	SPECIFICATIONS SECTION 4.7.1.2. (R0-50-315/76-35)	80
7 8 9		

CAUSE DESCRIPTION

08	INVESTIGATION REVEALED THAT RESET SOLENOID WAS DEFECTIVE (GE MODEL CR9503). THE SOLENOID	80
09	WAS REPLACED AND THE OVERSPEED TRIP SWITCH WAS REALIGNED. THIS CORRECTED ANNUNCIATOR	80
10	ALARM FAILURE. THE TURBINE TRIP FEATURE FUNCTIONALLY TESTED LOCALLY (SEE SUPPLEMENT)	80

**FACILITY
STATUS**

PAGE		PAGE STATUS	% POWER	OTHER STATUS	METHOD OF DISCOVERY	DISCOVERY DESCRIPTION
7	8	E	100	NA	B	SURVEILLANCE TEST

FORM OF
ACTIVITY
RELEASED

FORM OF ACTIVITY RELEASED		CONTENT OF RELEASE		AMOUNT OF ACTIVITY		LOCATION OF RELEASE	
7	8	9	10	11		45	80
1	2	Z	NA			NA	

PERSONNEL EXPOSURES

NUMBER				TYPE	DESCRIPTION
13	0	0	0	Z	NA

PERSONNEL INJURIES

NUMBER				DESCRIPTION	
1	4	0	0	0	NA

PROBABLE CONSEQUENCES

[illegible]

LOSS OR DAMAGE TO FACILITY

TYPE		DESCRIPTION
15	Z	NA

PUBLICITY

17 NA 80

ADDITIONAL FACTORS

7 8 9 NA 80

13	NA
----	----

NAME: J.L. RISCHLING

PHONE: 616-465-5901 (368)

SUPPLEMENT TO REPORTABLE OCCURRENCE R0-50-315/76-35

SUPPLEMENT TO CAUSE DESCRIPTION

AND FROM CONTROL ROOM AND THE SURVEILLANCE TEST WAS COMPLETED
SATISFACTORILY.

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7-11-68