

CONTROL BLOCK:

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

1	P	A	P	B	S	2	2	0	0	-	0	0	0	0	-	0	0	3	4	1	1	1	1	4			5	
8	9	LICENSEE CODE				14	15	LICENSE NUMBER										25	26	LICENSE TYPE					30	57	CAT	58

194

REPORT SOURCE: 1 6 0 5 0 - 0 2 7 7 7 1 0 3 0 7 9 8 1 1 2 9 7 9 9
60 61 DOCKET NUMBER 68 69 EVENT DATE 74 75 REPORT DATE 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

2 With Unit 2 at power and Unit 3 off for refueling, during relamping
3 operations on the main off-gas stack it was discovered that the isokine-
4 tic sample line was broken. A diluted but representative sample contain-
5 ed by the tracing and insulation was still obtained. Higher than ind-
6 cated noble gas, iodine and particulate release rates occurred. It is
7 believed that no releases occurred during this period in excess of Tech-
8 Spec Limits.

SYSTEM CODE M C 11		CAUSE CODE B 12		CAUSE SUBCODE A 13		COMPONENT CODE P I P E X X 14		COMP SUBCODE A 15		VALVE URCODE Z 16							
LE/RQ REPORT NUMBER 17		EVENT YEAR 7 9 21 22		SEQUENTIAL REPORT NO. 0 4 8 24 26		OCCURRENCE CODE 0 3 28 29		REPORT TYPE L 30		REVISION NO. 0 32							
ACTION TAKEN B 18 33		FUTURE ACTION F 19 34		EFFECT ON PLANT Z 20 35		SHUTDOWN METHOD Z 21 36		HOURS 0 0 0 0 22 37 40		ATTACHMENT SUBMITTED Y 23 41		NPRD-4 FORM SUB N 24 42		PRIME COMP. SUPPLIER A 25 43		COMPONENT MANUFACTURER B 1 3 0 26 44 47	

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

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0 It appeared the sample line had been slightly crimped and subsequent ex-
1 pansion, contraction, and wind loading caused failure. Temporary repairs
2 were made within 2 hrs and permanent repairs made the next day. A weekly
3 test is being performed to insure line integrity. Appropriate adjust-
4 ments to release rates will be made.

FACILITY STATUS: 5 E 29 % POWER: 1 0 0 29 OTHER STATUS: 30 U/3 in Refueling METHOD OF DISCOVERY: A 31 DISCOVERY DESCRIPTION: 32 Found during relamping operation

ACTIVITY CONTENT
RELEASED OF RELEASE

AMOUNT OF ACTIVITY (35)

LOCATION OF RELEASE (36)

NA

NA

PERSONNEL EXPOSURES				DESCRIPTION (U)	
NUMBER	TYPE			DESCRIPTION	
7	0	0	37	38	NA
8	9	11	12	13	

PERSONNEL INJURIES		DESCRIPTION	
NUMBER			
0	0	0	NA

POOR ORIGINAL

LOSS OF OR DAMAGE TO FACILITY		(43)
TYPE	DESCRIPTION	
(9) Z (42)	NA	1542 162

79121 20347

ISSUED DESCRIPTION (45) NA

NRC USE ONLY

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