

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

CONTROL BLOCK:

0	1	N	C	B	E	P	1	2	0	0	-	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4			5
7	8	LICENSEE CODE						14	15	LICENSE NUMBER										25	LICENSE TYPE					30	57	CAT	58

REPORT SOURCE 7 8 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 During normal operation, a half scram and half group one isolation was received on

03 | channel A. Main steam line high radiation instrument, D12-RM-K603A, was found to be

0 4 | intermittently spiking. The instrument was placed in the standby mode and a half

0 5 |scram was inserted.

06 | Technical Specifications 3.3.2, 6.9.1.9b

07 _____

08

7 8 9 10 11 12 13 14 15 16 17 18 19 20

0 9 I A E A E L E C O N Z Z

SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP. SUBCODE VALVE SUBCODE

(17) LER/RO REPORT NUMBER EVENT YEAR
79—
 21 22 23

SEQUENTIAL REPORT NO. 072/
 24 25 26 27

OCCURRENCE CODE 03
 28 29

REPORT TYPE L—
 30 31

REVISION NO. 0
 32

ACTION TAKEN		FUTURE ACTION		EFFECT ON PLANT		SHUTDOWN METHOD		HOURS				ATTACHMENT SUBMITTED		NPRD-4 FORM SUB.		PRIME COMP. SUPPLIER		COMPONENT MANUFACTURER			
B	18	Z	19	Z	20	Z	21	0	0	0	0	N	23	Y	24	N	25	A	3	8	0
33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1	0	The connector on the high voltage cable was loose and not making good contact. The
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connector was removed, cable and connector parts were cleaned, and the connector was

1 2 | reinstalled and tightened for a good connection. The cable was reconnected to the |

[1] [2] | instrument and the reading was stable. Visually inspected all other main steam line |

1	4
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 1 drawers for proper connections. This is considered an isolated event.

1 5 E 28 0 9 6 29 NA 30 A 31 Operator Surveillance 32

ACTIVITY CONTENT
RELEASED OF RELEASE AMOUNT OF ACTIVITY (35)

1 6 Z (33) Z (34) NA

7 8 9 10 11 44

NA LOCATION OF RELEASE (36)

45 80

PERSONNEL EXPOSURES									
NUMBER			TYPE	DESCRIPTION					
1	7	0	0	0	37	Z	38	NA	

PERSONNEL INJURIES		NUMBER		DESCRIPTION	
1	8	0	0	0	NA

		LOSS OF OR DAMAGE TO FACILITY		
		TYPE	DESCRIPTION	
1	9	Z	(42) NA	(43)

7910210414

80

PUBLICITY
 ISSUED DESCRIPTION (45)
 2 0 N (44) NA
 7 8 9 10 68 69 80

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