

LES-19-157-NRC

NOV 01 2019



Attn: Document Control Desk  
Director  
Office of Nuclear Material Safety and Safeguards  
U. S. Nuclear Regulatory Commission  
Washington, DC 20555-0001

Louisiana Energy Services, LLC  
License Number: SNM-2010  
NRC Docket Number: 70-3103

Subject: 60 Day Written Follow-up Report for Event Notification 54324

On October 10, 2019 Louisiana Energy Services, LLC dba URENCO USA (UUSA), submitted Event Notification 54324 to the NRC Operations Center in accordance with 10 CFR 70.74(a). As required by 10 CFR 70 Appendix A(b), UUSA is providing this letter which contains the 60 day written follow-up to the initial report.

Enclosure 1 contains the written content of the notification submitted on October 10, 2019. Enclosure 2 of this letter contains additional information. Together, these enclosures contain the content required by 10 CFR 70.50(c).

If you have any questions, please contact Scott Diggs, Acting Licensing and Performance Assessment Manager at 575-394-6203.

Respectfully,

A handwritten signature in black ink, appearing to read 'Stephen Cowne', is written over the printed name.

Stephen Cowne  
Chief Nuclear Officer and Compliance Manager

Enclosures: 1. Event Report Notification 54324  
2. Written Follow-up Report

IE72  
NMSS20  
NMSS

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cc:

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**ENCLOSURE 1**

**Event Report Notification 54324**

<b>NRC FORM 361A</b> (8-2010)		<b>U.S. NUCLEAR REGULATORY COMMISSION</b>		LICENSE NUMBER  <b>SNM-2010</b>				
<b>FUEL CYCLE AND MATERIALS EVENT NOTIFICATION WORKSHEET</b>								
REPORT TIME  1735 EDT	FACILITY OR ORGANIZATION  Louisiana Energy Services, LLC (URENCO USA)	NAME OF CALLER  Jim Rickman	CALL BACK TELEPHONE NO.  (575) 394-6558					
EVENT TIME  10:30 AM MDT	EVENT DATE  06/06/2018	LOCATION OF EVENT (Include County and State)  Lea County New Mexico	PORTION OF PLANT AFFECTED  SBM 1001 Autoclave					
<b>EVENT CLASSIFICATIONS</b>  <input type="checkbox"/> GENERAL EMERGENCY * <input type="checkbox"/> SITE AREA EMERGENCY <input type="checkbox"/> ALERT <input type="checkbox"/> NOTIFICATION OF UNUSUAL EVENT * <input type="checkbox"/> INCIDENT REPORT <input type="checkbox"/> TRANSPORTATION EVENT <input type="checkbox"/> INFORMATION ONLY <input checked="" type="checkbox"/> OTHER (Specify)  10 CFR 70 Appendix A Criteria b.2  * ONLY UNDER OLD 1981 ORDER		<b>EVENT TYPES</b>  <input checked="" type="checkbox"/> FUEL CYCLE <input type="checkbox"/> MEDICAL / ACADEMIC <input type="checkbox"/> TRANSPORTATION <input type="checkbox"/> WASTE MANAGEMENT <input type="checkbox"/> INDUSTRIAL / COMMERCIAL <input type="checkbox"/> FOREIGN EVENT <input type="checkbox"/> OTHER (Specify)						
<table border="0" style="width: 100%;"> <tr> <td colspan="2" style="width: 50%; vertical-align: top;"> <b>INCIDENT REPORTS (30.50, 40.60, 70.50)</b>   <input type="checkbox"/> 20.2201 LOSS / THEFT  <input type="checkbox"/> 20.2202 ACTUAL / THREATENED OVEREXPOSURE  <input type="checkbox"/> 20.2202 ACTUAL / THREATENED RELEASE  <input type="checkbox"/> 21.21 DEFECT / NONCOMPLIANCE  <input type="checkbox"/> 26.719 FITNESS FOR DUTY  <input type="checkbox"/> 35.3045 MEDICAL EVENT  <input type="checkbox"/> 36.83 IRRADIATOR EVENT  <input type="checkbox"/> 39.77 RUPTURED WELL LOGGING SOURCE  <input type="checkbox"/> 39.77 IRRETRIEVABLE WELL LOGGING SOURCE  <input type="checkbox"/> 40.26 TAILINGS / WASTE DAM FAILURE           </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> (a) PROTECTIVE ACTION PREVENTED  <input type="checkbox"/> (b)(1) UNPLANNED CONTAMINATION  <input type="checkbox"/> (b)(2) SAFETY EQUIPMENT FAILURE  <input type="checkbox"/> (b)(3) MEDICAL TREATMENT WITH CONTAMINATION  <input type="checkbox"/> (b)(4) FIRE / EXPLOSION  <input type="checkbox"/> 70.52 CRITICALITY / SNM LOST  <input type="checkbox"/> 70.52 ACTUAL / ATTEMPTED THEFT  <input type="checkbox"/> CRITICALITY CONTROL 4-HOUR (BULLETIN 91-01)  <input type="checkbox"/> CRITICALITY CONTROL 24-HOUR (BULLETIN 91-01)  <input type="checkbox"/> OTHER NON-CFR REQUIREMENT           </td> </tr> </table>						<b>INCIDENT REPORTS (30.50, 40.60, 70.50)</b>  <input type="checkbox"/> 20.2201 LOSS / THEFT <input type="checkbox"/> 20.2202 ACTUAL / THREATENED OVEREXPOSURE <input type="checkbox"/> 20.2202 ACTUAL / THREATENED RELEASE <input type="checkbox"/> 21.21 DEFECT / NONCOMPLIANCE <input type="checkbox"/> 26.719 FITNESS FOR DUTY <input type="checkbox"/> 35.3045 MEDICAL EVENT <input type="checkbox"/> 36.83 IRRADIATOR EVENT <input type="checkbox"/> 39.77 RUPTURED WELL LOGGING SOURCE <input type="checkbox"/> 39.77 IRRETRIEVABLE WELL LOGGING SOURCE <input type="checkbox"/> 40.26 TAILINGS / WASTE DAM FAILURE		<input type="checkbox"/> (a) PROTECTIVE ACTION PREVENTED <input type="checkbox"/> (b)(1) UNPLANNED CONTAMINATION <input type="checkbox"/> (b)(2) SAFETY EQUIPMENT FAILURE <input type="checkbox"/> (b)(3) MEDICAL TREATMENT WITH CONTAMINATION <input type="checkbox"/> (b)(4) FIRE / EXPLOSION <input type="checkbox"/> 70.52 CRITICALITY / SNM LOST <input type="checkbox"/> 70.52 ACTUAL / ATTEMPTED THEFT <input type="checkbox"/> CRITICALITY CONTROL 4-HOUR (BULLETIN 91-01) <input type="checkbox"/> CRITICALITY CONTROL 24-HOUR (BULLETIN 91-01) <input type="checkbox"/> OTHER NON-CFR REQUIREMENT
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<b>NOTIFICATIONS</b>  NRC REGION? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> WILL BE STATE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> WILL BE LOCAL? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> WILL BE OTHER GOVERNMENT AGENCIES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> WILL BE PRESS RELEASE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> WILL BE		ANYTHING UNUSUAL OR NOT UNDERSTOOD? <input type="checkbox"/> YES (Explain below) <input checked="" type="checkbox"/> NO  DID ALL SYSTEMS FUNCTION AS REQUIRED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Explain below)  ADDITIONAL INFORMATION ON PAGE 2? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO						
<b>EVENT DESCRIPTION (Continue on Page 2 if necessary)</b>								
<p>EN 54324</p> <p>On October 10, 2019 at approximately 6:30 PM, a responsible individual at Louisiana Energy Services LLC, dba URENCO USA was informed that on June 5th, 2018, at approximately 4:00 PM MDT, pressure instrument isolation valve, 1001-471-1A12, was found open when it should have been shut to maintain the pressure boundary of autoclave 1LS1. The autoclave is used to homogenize UF6 and obtain samples. The autoclave pressure boundary forms IROFS10.</p> <p>Prior to the event, on May 31 2018, annual maintenance was performed on the autoclave as required by the IROFS10 surveillance requirements. Subsequently, a homogenization and UF6 sampling was performed June 1st through June 5th on a 30B cylinder of UF6. During preparations for a subsequent homogenization cycle, valve 1001-471-1A12 was found open. The valve should have remained closed from the previous homogenization. There was not an initiating event (no release of UF6) and no initiation of an accident sequence. The valve has been shut and the IROFS boundary has been restored. The plant is in a safe configuration.</p> <p>This event has been identified in UUSA's corrective action program as EV 133619 and a causal investigation is planned.</p> <p>End of report.</p>								

## RADIOLOGICAL / CHEMICAL RELEASES: CHECK OR FILL IN APPLICABLE ITEMS

ISOTOPE	ACTIVITY	PHYSICAL FORM	CHEMICAL FORM		STACK	LIQUID EFFLUENT	OTHER
				MONITOR READING			
				ALARM SETPOINT			

- ☐ ONGOING RELEASE  
☐ TERMINATED RELEASE  
☐ OFFSITE RELEASE  
☐ ONSITE AREAS EVACUATED  
☐ OFFSITE PROTECTIVE ACTION RECOMMENDED

## PERSONNEL EXPOSURE / CONTAMINATION DATA

NUMBER OF PERSONNEL EXPOSED:	NUMBER OF PERSONNEL CONTAMINATED:
MAXIMUM EXTERNAL DOSE:	MAXIMUM EXTERNAL LEVEL:
MAXIMUM INTERNAL DOSE:	MAXIMUM INTERNAL LEVEL:
CRITICAL ORGAN (if known):	CIRITIAL ORGAN (if known):

## DEGRADED CRITICALITY SAFETY CONTROLS FOR ACCIDENT SCENARIO(S) (BULLETIN 91-01)

- ☐ ALL CONTROLS LOST   
 ☐ ALL BUT SINGLE CONTROLS LOST   
 ☐ DEFICIENT SAFETY ANALYSIS   
 ☐ SAFETY SIGNIFICANCE UNKNOWN   
 ☐ >45% MINIMUM CRITICAL MASS PRESENT OR READILY AVAILABLE

NUMBER AND TYPES OF CONTROLS NECESSARY UNDER NORMAL OPERATING CONDITIONS

NUMBER AND TYPES OF CONTROLS WHICH FUNCTIONED PROPERLY UNDER UPSET CONDITIONS

NUMBER AND TYPES OF CONTROLS NECESSARY TO RESTORE A SAFE SITUATION

SAFETY SIGNIFICANCE OF EVENTS

SAFETY EQUIPMENT STATUS

STATUS OF CORRECTIVE ACTIONS

## EVENT DESCRIPTION (Continued)

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**ENCLOSURE 2**

**Written Follow-up Report**

Written Follow-up Report

- I. Applicable information required by 10 CFR 70.50(c)(2)
  - a. The probable cause of the event, including all factors that contributed to the event and the manufacturer and model number (if applicable) of any equipment that failed or malfunctions is provided below:
    - i. UUSA has determined that the causes are the same as the event described in EN54101. As such, the investigation determined that the apparent cause was complacency due to infrequent operation of the 1001-471-1A12 isolation valve. The contributing causes were;
      1. Improper verification of valve positions by use of visual verification –vs- hands on verification.
      2. MA-3-2470-01, Autoclave Leak Check Surveillance IROFS10, leaves the valves out of their normal position
      3. Steps that ensure integrity of IROFS10 and 28 in OP-3-0470-01 are not flagged as critical steps and commitment steps
      4. Valves that are not usually operated makeup the IROFS10 established boundary
      5. Steps that ensure integrity of IROFS are not flagged as critical steps and commitment steps
      6. Not all personnel are aware of the impact their day to day jobs may have on the safety function of IROFS
  - b. Corrective actions taken or planned to prevent occurrence of similar or identical events in the future and the results of any evaluations or assessments are:
    - i. UUSA has determined that the corrective actions are the same as the event described in EN54101. The operators will receive coaching on the dangers of complacency when doing routine evolutions. The planned corrective actions that will strengthen the robustness of the IROFS10 boundaries include retraining the operators in the preferred method of performing valve verifications and procedural enhancements to minimize the probability of recurrence.
  - c. UUSA is subject to Subpart H of 10 CFR 70; therefore, a discussion of whether the condition was identified and evaluated in the Integrated Safety Analysis (ISA) is provided below:
    - i. The IROFS was identified in the UUSA ISA as a safety control to mitigate the consequences of a release of UF6 within the autoclave. The ISA evaluated accident sequences that could result in consequences to the workers and public. The valve was determined to be needed to mitigate the adverse consequences to workers and public.