

LICENSEE EVENT REPORT

CONTROL BLOCK: 1 (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

01 WIKNP1 200-00000-00 341111 45
8 9 14 15 25 26 30 37 CAT 58
 LICENSEE CODE LICENSE NUMBER LICENSE TYPE

CON'T 01 L 605000305 7051081 8060981 9
60 61 68 69 74 75 80
 REPORT SOURCE DOCKET NUMBER EVENT DATE REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES 10

02 Surveillance testing during refueling shutdown indicated that one steam flow trans-
03 mitter was out of calibration resulting in Hi Steam Flow and Hi-Hi Steam Flow trip
04 settings less conservative than T.S. requirements, TS 3.5.a. The other channels of
05 steam flow instrumentation were operable within T.S. limits and would have initiated
06 steam line isolation as required. There was no effect on plant operation or public
07 safety. Occurrences of excessive drift have been previously reported.

08 9
7 8 9
 SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP. SUBCODE VALVE SUBCODE
IB X Z INSTR T Z
9 10 11 12 13 18 19 20
 LER/RO REPORT NUMBER EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVISION NO.
81 015 03 L 0
21 22 23 24 26 27 28 29 30 31 32
 ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS ATTACHMENT SUBMITTED NPRO-4 FORM SUB. PRIME COMP. SUPPLIER COMPONENT MANUFACTURER
EX Z Z 000 N N N B080
33 34 35 36 37 40 41 42 43 44 47

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS 27

10 Instrumentation drift of the Barton steam flow transmitter caused it to be out of
11 calibration condition. The transmitter was recalibrated and returned to service.
12 The onsite review group is continuing to review the performance of transmitters
13 with specifications in Technical Specifications. An update report will be issued
14 upon completion of that review.

15 H 000 NA B Surveillance Testing
8 9 10 12 13 44 45 46 80
 FACILITY STATUS % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION
 ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE
Z Z NA NA
10 11 12 13 44 45 80
 PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION
000 Z NA
11 12 13 80
 PERSONNEL INJURIES NUMBER DESCRIPTION
000 NA
11 12 80
 LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION
Z NA
10 80
 PUBLICITY ISSUED DESCRIPTION
N NA
10 80

NAME OF PREPARER J. J. Wallace

PHONE: (414) 433-1329

8106180-398