

LICENSEE EVENT REPORT

EXHIBIT A

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

0 1 N C M G S 1 2 0 0 - 0 0 0 0 0 0 - 0 0 3 4 1 1 1 1 4 5
 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
 LICENSEE CODE LICENSE NUMBER LICENSE TYPE CAT 58

CONT
 0 1 REPORT SOURCE L 6 0 5 0 0 0 3 6 9 7 0 4 1 2 6 8 1 3 0 5 1 2 6 8 1 3
 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
 DOCKET NUMBER EVENT DATE REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES 10
 0 2 While in Mode 3, initial fuel loading, a cold leg accumulator D low level
 0 3 alarm was received in the Control Room. The level was below the minimum
 0 4 required by Technical Specification 3.5.1.1 and thus is reportable per
 0 5 Technical Specification 6.9.1.13(b). Since there is only new fuel in the
 0 6 core and the other three accumulators remained operable, the health and
 0 7 safety of the public were not affected.

0 8

0 9 SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP SUBCODE VALVE SUBCODE
 P C E B V A L V E X C D
 11 12 13 14 15 16
 9 10 11 12 13 14 15 16 17 18 19 20
 LER/RO REPORT NUMBER EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVISION NO.
 8 1 0 6 1 9 0 3 L 0
 21 22 23 24 25 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
 E R Z Z 0 0 0 0 Y N L W 0 1 3 0
 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
 CAUSE DESCRIPTION AND CORRECTIVE ACTIONS 27

1 0 The safety injection test header was leaking which allowed the accumulator
 1 1 to leak to below its minimum setpoint. The level was restored and the
 1 2 leaking valve will be replaced and tested.

1 3

1 4

1 5 FACILITY STATUS % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION
 X 0 0 0 0 Mode 3 A Operator Observation
 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
 ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE
 Z Z NA NA
 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
 PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION
 0 0 0 Z NA
 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60
 PERSONNEL INJURIES NUMBER DESCRIPTION
 0 0 0 NA
 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60
 LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION
 Z NA
 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60
 PUBLICITY ISSUED DESCRIPTION
 N NA
 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60
 NAME OF PREPARER R. W. Ouellette PHONE: (704) 373-7530
 58 59 60