

# LICENSEE EVENT REPORT

036717

CONTROL BLOCK:

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

1 M D C C N 1 2 0 0 - 0 0 0 0 0 0 - 0 0 3 4 1 1 1 1 4 5  
8 9 LICENSE CODE 14 15 LICENSE NUMBER 25 26 LICENSE TYPE 30 37 CAT 38

1 1 REPORT SOURCE L 6 0 5 0 0 0 3 1 7 7 0 3 2 0 8 1 3 0 4 1 6 8 1 9  
8 60 61 DOCKET NUMBER 68 69 EVENT DATE 74 75 REPORT DATE 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

2 2 At 0600 during a routine test it was discovered that CHMT normal sump  
0 3 drain, 1-MOV-5463 exceed the maximum closing time of 13 sec (T.S. 3.6.  
3 4 4.1). The valve was declared inoperable and maintained closed. The  
0 5 redundant valve remained operable, therefore the safety of the public  
0 6 was not affected. The valve stroke was adjusted and the valve was re-  
0 7 turned to service at 1020. LER 78-30 describes a similar event.

0 9 SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP SUBCODE VALVE SUBCODE  
M A 11 0 12 Z 13 V A L L V O P 14 A 15 7 16  
17 LER-RO REPORT NUMBER EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVISION NO.  
8 1 1 0 2 0 0 3 L 0  
ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS ATTACHMENT SUBMITTED APPROX FORMS PRIME COMP. SUPPLIER COMPONENT MANUFACTURER  
A 18 X 19 Z 20 Z 21 0 0 0 0 N 23 N 24 A 25 L 2 0 0 0 26  
33 34 35 36 37 40 41 42 43 44 47

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 The valve operator (Limitorque SMB-00-5) open limit switch was found to  
1 1 be out of adjustment. The switch was adjusted and the valve was retested  
1 2 with satisfactory results. The valve is surveillance tested quarterly.  
1 3 No further preventive action is deemed necessary at this time.

1 4 FACILITY STATUS % POWER OTHER STATUS (30) METHOD OF DISCOVERY DISCOVERY DESCRIPTION (32)  
1 5 E 28 1 0 0 0 29 NA B 31 Routine Test  
8 9 10 11 12 13 44 45 46 80  
1 6 ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT OF ACTIVITY (35) LOCATION OF RELEASE (36)  
1 7 Z 33 Z 34 NA NA  
8 9 10 11 44 45 80  
1 7 PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION (39)  
1 8 0 0 0 37 Z 38 NA  
8 9 10 11 12 13 80  
1 4 PERSONNEL INJURIES NUMBER DESCRIPTION (41)  
1 9 0 0 0 40 NA  
8 9 10 11 12 80  
1 9 LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION (43)  
1 9 Z 42 NA  
8 9 10 80  
1 9 PUBLICITY NUMBER DESCRIPTION (45)  
2 0 N 44 NA  
8 9 10 80

NRC USE ONLY

NAME OF OPERATOR S. M. Davis/P. G. Rizzo

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