

## (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

CONTROL BLOCK: 

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 (1)

0	1	G	A	E	I	H	2	2	0	0	-	0	0	0	0	0	-	C	0	3	4	1	1	1	1	4			5		
7	8	LICENSEE CODE						14	15	LICENSE NUMBER										25	26	LICENSE TYPE					30	57	CAT		58

CON'T

## REPORT

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

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 | With the plant in refuel, 2E11-N010B and D, 2E11-N011B, contacts 1 and 2  
0 3 | and 2E11-N011D, contact 1, were found to actuate at 58.4, 62.4, 59, 56.8  
0 4 | and 57.8 ins. of H<sub>2</sub>O respectively. Tech Specs Table 3.3.3-2 requires  
0 5 | actuation at  $\leq 55.4$  ins. of H<sub>2</sub>O. Redundant switches 2E11-N010A and C  
0 6 | and 2E11-N011A and C were operable. Neither plant operation nor the  
0 7 | public health and safety were affected by this event. This is a non-  
0 8 | repetitive event.

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

0 9 I B E E I N S T R U S Z

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

(17) LER/RO REPORT NUMBER [ EVENT YEAR  
[ 8 | 2 ]  
21 22

[ 1 ]  
23

SEQUENTIAL REPORT NO.  
[ 0 | 3 | 1 ]  
24 25 26

[ / ]  
27

OCCURRENCE CODE  
[ 0 | 3 ]  
28 29

REPORT TYPE  
[ L ]  
30

[ 1 ]  
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			
E	18	Z	19	Z	20	Z	21	0	0	0	0	Y	23	N	24	N	25	B	0	6	9
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 cause of this event has been attributed to setpoint drift. The

1 1 | switches, Barksdale Model D2H, were recalibrated per HNP-2-5279, Barks-

1 2 | dale Pressure Switch Calibration, and immediately returned to service.

[illegible]

1	4	
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FACILITY STATUS	% POWER	OTHER STATUS (30)	METHOD OF DISCOVERY	DISCOVERY DESCRIPTION (32)

1	5	H	28	0	0	0	29	NA	B	31	Surveillance Testing
7	8	9		10	11	12	13		45	46	80

ACTIVITY		CONTENT		AMOUNT OF ACTIVITY (35)	LOCATION OF RELEASE (36)
1	6	7	(33)		
				NA	NA

PERSONNEL EXPOSURES

NUMBER	TYPE	DESCRIPTION
7		
8		
9		
10		
11		
44		
45		
80		

1 7 0 0 0 (37) Z (38) NA 80

PERSONNEL INJURIES					
		NUMBER		DESCRIPTION (41)	
1	8			(40)	
		0	0	0	NA

7 8 9 10 11 12 80

LOSS OF OR DAMAGE TO FACILITY (43)

TYPE DESCRIPTION

1 9 Z (42) NA

PUBLICITY		ISSUED		DESCRIPTION		45		8205210254 820515		PDR ADOCK 05000366		PDR		NRC USE ONLY	
2	0	N	44												

PHONE: 912-367-7781

CONFIRMATION STATEMENT

For Document 50-366/1982-031 Rev 0  
(Description of Document)

I have checked the statements made in this document and, to the best of my knowledge, the statements made in this response are accurate.

C. D. Henry  
(Signature)

5-5-82  
(Date)

REGULATORY COMPLIANCE REVIEW
DOCUMENT # <u>LER 2-82-31</u>
CHANGES NEEDED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
IF YES, SEE COMMENTS
COMMENTS: <u>corrected</u>
REVIEWED BY: <u>TKS</u>
DATE: <u>5/6/82</u>

REGULATORY COMPLIANCE REVIEW
DOCUMENT # <u>LER 2-82-31</u>
CHANGES NEEDED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
IF YES, SEE COMMENTS
COMMENTS:
REVIEWED BY: <u>TKS</u>
DATE: <u>5/7/82</u>