

LICENSEE EVENT REPORT

CONTROL BLOCK 1 2 3 4 5 6

(PLEASE PRINT ALL REQUIRED INFORMATION)

LICENSEE NAME						LICENSE NUMBER						LICENSE TYPE				EVENT TYPE								
01	M	N	M	N	P	1	0	0	-	0	0	0	0	-	0	0	4	1	1	1	1	0	1	
7	8	9				14	15										25	26				30	31	32

CATEGORY		REPORT TYPE	REPORT SOURCE	DOCKET NUMBER				EVENT DATE				REPORT DATE											
01	CONT	T	L	0	5	0	-	0	2	6	3	1	0	1	3	7	7	1	1	1	8	7	7
7	8	57	58	59	60	61				68	69					74	75						80

EVENT DESCRIPTION

02	While performing local leak rate test the "A" inboard MSIV, AO-2-80A was found	80
03	leaking in excess of the technical specification acceptance criteria. Redundant	80
04	isolation valve had been leaking prior to being repaired. Previous events.	80
05	Valve seats lapped. (M-RO-77-24-1)	80
06		80

SYSTEM CODE		CAUSE CODE	COMPONENT CODE				PRIME COMPONENT SUPPLIER	COMPONENT MANUFACTURER				VIOLATION			
07	C	D	E	V	A	L	V	E	X	A	A	5	8	5	Y
7	8	9	10							43					48

CAUSE DESCRIPTION

08	Atty od and Morrill Co. 18" Y type Globe valve, drawing 20786-H. Failed leak rate	80
09	test; but no apparent cause identified. Seats lapped and valve retested	80
10	satisfactory.	80

FACILITY STATUS		% POWER		OTHER STATUS		METHOD OF DISCOVERY		DISCOVERY DESCRIPTION	
11	H	0	0	0	NA	B	NA		
7	8	9	10	11	12	13	44	45	

FORM OF ACTIVITY RELEASED		CONTENT OF RELEASE		AMOUNT OF ACTIVITY		LOCATION OF RELEASE	
12	Z	Z	NA			NA	
7	8	9	10	11		44	45

PERSONNEL EXPOSURES

NUMBER	TYPE	DESCRIPTION
13	0	0
7	8	9

PERSONNEL INJURIES

NUMBER	DESCRIPTION
14	0
7	8

OFFSITE CONSEQUENCES

15	NA	80
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LOSS OR DAMAGE TO FACILITY

TYPE	DESCRIPTION
16	Z
7	8

PUBLICITY

17	NA	80
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ADDITIONAL FACTORS

18	NA	80
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19	NA	80
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NAME J A Tobin

PHONE 612/295-5151

9102130552 771118
CF ADDCK 05000263
CF

GFC 881-667