

## LICENSEE EVENT REPORT

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

01 F L S L S 2 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  
LICENSEE CODE LICENSE NUMBER LICENSE TYPE CAT 18

01  
7 8  
CON'T

01  
7 8  
REPORT SOURCE L 5 0 5 0 0 0 3 8 9 7 0 7 1 2 8 3 3 0 8 1 1 8 3 9  
30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50  
DOCKET NUMBER EVENT DATE REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 While in Mode 3 during initial power ascension testing, 2 out of 4 safe-  
03 ty injection tanks depressurized to the minimum limit specified by T.S.  
04 3.5.1 as indicated by the presence of Lo-Lo Alarms. Pressure was immidia  
05 tely restored and the tanks returned to operable status in accordance  
06 with the Tech Specs. This was the third occurrence of this type (LER's  
07 83-20 & 83-25). There was no adverse affect on the health or safety of  
08 the public. The tanks would have discharged if needed.  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

09  
7 8 9  
SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP TURCODE VALVE SUBCODE  
S F 11 A 12 B 13 A C C U M U 14 Z 15 Z 16  
9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

17 LER/RO REPORT NUMBER 8 3 21 22  
18 ACTION TAKEN X 19 Z 20 Z 21 Z 22 0 0 0 0 23 Y 24 N 25 N 26 X 27 9 28 9 29 9 30  
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  
EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVISION NO.  
8 3 0 3 5 0 3 L 0  
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

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

10 The cause of this event has not been absolutely determined however it is  
11 suspected that the SIT's depressurized via V-3466 as in the previous  
12 events. The SIT's discharge check valve had just been leak tested in  
13 accordance with T.S. 3.4.6.2 by pressurizing against the check vlvs with  
14 a HPSI Pump. Manual isolation and SIT levels monitored for in leakage.  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

15 FACILITY STATUS B 16 0 17 0 18 0 19 0 20 NA 21 A 22 Operator observation  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30  
% POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION

15 ACTIVITY CONTENT 16 Z 17 Z 18 NA 19 NA 20 NA 21 NA 22 NA 23 NA 24 NA 25 NA 26 NA 27 NA 28 NA 29 NA 30 NA  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30  
RELEASED OR RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE

17 PERSONNEL EXPOSURES 18 0 19 0 20 0 21 Z 22 NA 23 NA 24 NA 25 NA 26 NA 27 NA 28 NA 29 NA 30 NA  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30  
NUMBER TYPE DESCRIPTION

17 PERSONNEL INJURIES 18 0 19 0 20 0 21 NA 22 NA 23 NA 24 NA 25 NA 26 NA 27 NA 28 NA 29 NA 30 NA  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30  
NUMBER DESCRIPTION

17 LOSS OF OR DAMAGE TO FACILITY 18 Z 19 NA 20 NA 21 NA 22 NA 23 NA 24 NA 25 NA 26 NA 27 NA 28 NA 29 NA 30 NA  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30  
TYPE DESCRIPTION

17 PUBLICITY 18 NA 19 NA 20 NA 21 NA 22 NA 23 NA 24 NA 25 NA 26 NA 27 NA 28 NA 29 NA 30 NA  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30  
DESCRIPTION

20 NAME OF PREPARER G. E. Walling  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

8308190372 830811  
PDR ADOCK 05000389  
S PDR

NRC USE ONLY  
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

NAME OF PREPARER G. E. Walling PWCNE 305-465-3550 X3580

LER 389-83-35 (Cont)

Manual isolation valves were properly closed to prevent lifting RV-3466. When the test was completed, there is no way to bleed off pump pressure.

It is suspected that when the manual valves were restored to the open position, in conjunction with suspected leakage past the loop check leak detection valves, RV-3466 lifted and 2 SIT's (2A1 and 2A2) depressurized.

Our Engineering Department has been requested to review this problem and to develop a permanent fix.

USNRC REGION II  
ATLANTA, GEORGIA

83 AUG 17 A8:06



August 11, 1983  
PNS-LI-83-542-1

Mr. James P. O'Reilly  
Regional Administrator, Region II  
U. S. Nuclear Regulatory Commission  
101 Marietta Street N.W., Suite 2900  
Atlanta, Georgia 30303

Dear Mr. O'Reilly:

REPORTABLE OCCURRENCE 389-83-35

ST. LUCIE UNIT 2

DATE OF OCCURRENCE: JULY 12, 1983

TECHNICAL SPECIFICATION 3.5.1

SAFETY INJECTION TANKS

The attached Licensee Event Report is being submitted in accordance with Technical Specification 6.9 to provide 30-day notification of the subject occurrence.

Very truly yours,

A handwritten signature in dark ink, appearing to read "J. W. Williams, Jr.", is written over a horizontal line.

J. W. Williams, Jr.  
Vice President  
Nuclear Energy

JWW/PLP/js

Attachment

cc: Director, Office of Inspection and Enforcement (30)  
Harold F. Reis, Esquire  
File 933.1 SL

OFFICIAL COPY

IE 22  
1/1