

CONTROL BLOCK: 1										(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)																																																																															
01	A	L	J	M	F	2	2	0	0	-	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4		5																																																														
LICENSEE CODE										LICENSEE NUMBER										LICENSE TYPE										CAT 58																																																											
CONT																																																																																									
01	L	6	0	5	0	0	0	3	6	4	7	1	1	1	9	8	3	8	1	2	1	9	8	3	9																																																																
REPORT SOURCE										DOCKET NUMBER										EVENT DATE										REPORT DATE																																																											
EVENT DESCRIPTION AND PROBABLE CONSEQUENCES 10																																																																																									
02	At 1000 on 11/19/83, valve Q2E11HV8880 (Nitrogen Supply to Accumulator Isolation)																																																																																								
03	was declared inoperable when it failed to close fully. Tech. Spec. 3.6.3, in part,																																																																																								
04	requires this valve to be operable. Tech. Spec. 3.6.3 action statement require-																																																																																								
05	ments were met. Health/safety of the public was not affected. A similar occur-																																																																																								
06	rence was reported in LER 83-007/03L-0.																																																																																								
07																																																																																									
08																																																																																									
SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP. SUBCODE VALVE SUBCODE																																																																																									
09	S	D	11	X	12	Z	13	V	A	L	V	E	X	14	F	15	D	16																																																																							
LER/RO REPORT NUMBER										EVENT YEAR										SEQUENCE REPORT NO.										OCCURRENCE CODE										REPORT TYPE										REVISION NO.																																							
17										83										0611										03										L										0																																							
ACTION TAKEN										FUTURE ACTION										EFFECT ON PLANT										SHUTDOWN METHOD										HOURS										ATTACHMENT SUBMITTED										NPRD-4 FORM SUB.										PRIME COMP. SUPPLIER										COMPONENT MANUFACTURER									
X										X										Z										Z										0000										N										N										N										C635									
CAUSE DESCRIPTION AND CORRECTIVE ACTIONS 27																																																																																									
10	No cause for this event could be determined. The valve is being maintained isola-																																																																																								
11	ted, except when in use, and will be repaired at the next outage of sufficient																																																																																								
12	duration.																																																																																								
13																																																																																									
14																																																																																									
FACILITY STATUS % POWER OTHER STATUS 30 METHOD OF DISCOVERY DISCOVERY DESCRIPTION 32																																																																																									
15	E	28	1	0	0	29	NA	A	31	Operational Event																																																																															
ACTIVITY CONTENT RELEASED OF RELEASE										AMOUNT OF ACTIVITY 35										LOCATION OF RELEASE 36																																																																					
16	Z	33	Z	34	NA										NA																																																																										
PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION 39																																																																																									
17	0	0	0	37	Z	38	NA																																																																																		
PERSONNEL INJURIES NUMBER DESCRIPTION 41																																																																																									
18	0	0	0	40	NA																																																																																				
LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION 43																																																																																									
19	Z	42	NA																																																																																						
PUBLICATION ISSUED DESCRIPTION 45																																																																																									
20	N	44	NA																																																																																						
NAME OF PREPARER W. G. Hairston, III PHONE (205) 899-5156																																																																																									

8312280489 831219
PDR ADOCK 05000348
S PDR

NRC USE ONLY

CONTROL BLOCK:										(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)									
01 ALJMF2200-000000-00034111114										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										57 CAT 58									
CON'T																			
01 REPORT SOURCE L60500003647111198381219839																			
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																			
EVENT DESCRIPTION AND PROBABLE CONSEQUENCES 10																			
02 At 1000 on 11/19/83, valve Q2E11HV8880 (Nitrogen Supply to Accumulator Isolation)																			
03 was declared inoperable when it failed to close fully. Tech. Spec. 3.6.3, in part,																			
04 requires this valve to be operable. Tech. Spec. 3.6.3 action statement require-																			
05 ments were met. Health/safety of the public was not affected. A similar occur-																			
06 rence was reported in LER 83-007/03L-0.																			
07																			
08																			
09																			
SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP. SUBCODE VALVE SUBCODE																			
SD11 X12 Z13 VALVEX14 F15 D16																			
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																			
17 LER/RO REPORT NUMBER 83										18									
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																			
ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS ATTACHMENT SUBMITTED NRPD-4 FORM SUB. PRIME COMP. SUPPLIER COMPONENT MANUFACTURER																			
X18 X19 Z20 Z21 00000 N23 N24 N25 C635																			
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																			
CAUSE DESCRIPTION AND CORRECTIVE ACTIONS 27																			
10 No cause for this event could be determined. The valve is being maintained isola-																			
11 ted, except when in use, and will be repaired at the next outage of sufficient																			
12 duration.																			
13																			
14																			
FACILITY STATUS % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION																			
15 E28 10029 NA A31 Operational Event																			
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																			
ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE																			
16 Z33 Z34 NA 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 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50																			
PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION																			
17 00037 Z38 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 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50																			
PERSONNEL INJURIES NUMBER DESCRIPTION																			
18 00040 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 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50																			
LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION																			
19 Z42 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 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50																			
PUBICITY ISSUED DESCRIPTION																			
20 N44 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 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50																			
NAME OF PREPARER W. G. Hairston, III										PHONE (205) 899-5156									

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

CON'T

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

PHONE (205) 899-5156