

CONTROL BLOCK										(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)																		
01	C	A	S	0	S	2	2	0	0	-	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4		5	
LICENSEE CODE					LICENSE NUMBER					LICENSE TYPE					CAT 58													
CONT																												
01	L	6	0	5	0	0	0	3	6	1	7	1	2	1	2	8	2	8	1	2	1	2	8	3	9			
REPORT SOURCE					DOCKET NUMBER					EVENT DATE					REPORT DATE													
EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (13)																												
02	Review of maintenance surveillance records revealed that monthly fire																											
03	hose station Surveillance Test S023-XIII-54 due 12/12/82 had not been																											
04	completed within the required surveillance interval. Compensatory																											
05	measures prescribed by LCO 3.7.8.3, Action Statement 'a' were not imple-																											
06	mented. The surveillance was completed on 01/03/83. Public health and																											
07	safety were not affected. See LER 83-067 (Docket No. 50-361).																											
08																												
SYSTEM CAUSE CAUSE COMPONENT COMP. VALVE																												
CODE CODE SUBCODE CODE SUBCODE SUBCODE																												
09	A	B	11	D	12	Z	13	X	X	X	X	X	X	14	Z	15	Z	16										
LER/20 EVENT YEAR SEQUENTIAL OCCURRENCE REPORT REVISION																												
NUMBER REPORT NO. CODE TYPE NO.																												
17	8	2		1	7	2		0	3	L		0																
ACTION FUTURE EFFECT SHUTDOWN ATTACHMENT NPRO-4 PRIME COMP. COMPONENT																												
TAKEN ACTION ON PLANT METHOD SUBMITTED FORM SUB. SUPPLIER MANUFACTURER																												
18	G	19	Z	20	Z	21	0	0	0	0	N	23	N	24	A	25	S	1	8	2								
CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)																												
10	The surveillance was not performed within the required interval and																											
11	compensatory measures were not implemented due to procedural and																											
12	training inadequacies. The appropriate procedures have now been re-																											
13	vised and personnel have been instructed on the importance of meeting																											
14	Technical Specification surveillance requirements.																											
FACILITY % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION																												
STATUS 28 0 0 0 29 NA C 31 Compliance Audit 32																												
ACTIVITY CONTENT AMOUNT OF ACTIVITY LOCATION OF RELEASE																												
RELEASED OF RELEASE 33 34 NA 35 NA 36																												
PERSONNEL EXPOSURES																												
NUMBER TYPE DESCRIPTION 37 38 NA 39																												
PERSONNEL INJURIES																												
NUMBER DESCRIPTION 40 NA 41																												
LOSS OF OR DAMAGE TO FACILITY																												
TYPE DESCRIPTION 42 NA 43																												
PUBLICITY																												
ISSUED DESCRIPTION 44 NA 45																												
NRC USE ONLY																												
NAME OF PREPARER J. G. HAYNES PHONE 714/492-7700																												