

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

|              |    |                       |                 |                 |             |                      |                  |                      |                        |    |    |
|--------------|----|-----------------------|-----------------|-----------------|-------------|----------------------|------------------|----------------------|------------------------|----|----|
| SYSTEM CODE  |    | CAUSE CODE            | CAUSE SUBCODE   | COMPONENT CODE  |             |                      |                  | COMP. SUBCODE        | VALVE SUBCODE          |    |    |
| S            | B  | E                     | B               | I               | N           | S                    | T                | R                    | U                      | C  | Z  |
| 9            | 10 | 11                    | 12              | 13              | 14          | 15                   | 16               | 17                   | 18                     | 19 | 20 |
| EVENT YEAR   |    | SEQUENTIAL REPORT NO. | OCCURRENCE CODE |                 | REPORT TYPE |                      | REVISION NO.     |                      |                        |    |    |
| 8            | 3  | 0                     | 7               | 8               | 0           | 3                    | X                | 1                    |                        |    |    |
| 21           | 22 | 23                    | 24              | 25              | 26          | 27                   | 28               | 29                   |                        |    |    |
| ACTION TAKEN |    | FUTURE ACTION         | EFFECT ON PLANT | SHUTDOWN METHOD | HOURS       | ATTACHMENT SUBMITTED | NPRD-4 FORM SUB. | PRIME COMP. SUPPLIER | COMPONENT MANUFACTURER |    |    |
| E            | Z  | Z                     | Z               | 0               | 0           | 0                    | N                | Y                    | N                      |    |    |
| 18           | 19 | 20                    | 21              | 22              | 23          | 24                   | 25               | 26                   | 27                     |    |    |
| 33           | 34 | 35                    | 36              | 37              | 38          | 39                   | 40               | 41                   | 42                     |    |    |
| ACTION TAKEN |    | FUTURE ACTION         | EFFECT ON PLANT | SHUTDOWN METHOD | HOURS       | ATTACHMENT SUBMITTED | NPRD-4 FORM SUB. | PRIME COMP. SUPPLIER | COMPONENT MANUFACTURER |    |    |
| E            | Z  | Z                     | Z               | 0               | 0           | 0                    | N                | Y                    | N                      |    |    |
| 18           | 19 | 20                    | 21              | 22              | 23          | 24                   | 25               | 26                   | 27                     |    |    |
| 33           | 34 | 35                    | 36              | 37              | 38          | 39                   | 40               | 41                   | 42                     |    |    |

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

| FACILITY STATUS |      | % POWER |   | OTHER STATUS |      | METHOD OF DISCOVERY |   | DISCOVERY DESCRIPTION |                 |
|-----------------|------|---------|---|--------------|------|---------------------|---|-----------------------|-----------------|
| E               | (28) | 0       | 5 | 7            | (29) | N/A                 | A | (31)                  | NSC Observation |

| PERSONNEL EXPOSURES |        |             |  |
|---------------------|--------|-------------|--|
| NUMBER              | TYPE   | DESCRIPTION |  |
| 000                 | (37) Z | (39) N/A    |  |

| LOSS OF OR DAMAGE TO FACILITY |             | (43) |
|-------------------------------|-------------|------|
| TYPE                          | DESCRIPTION |      |
| Z (42)                        | N/A         |      |

NAME OF PREPARER B. Christel PHONE (815) 942-2920 x421

PHONE: (815) 942-2920 x421



**Commonwealth Edison**  
Dresden Nuclear Power Station  
R.R. #1  
Morris, Illinois 60450  
Telephone 815/942-2920

*DmB*

January 3, 1984

DJS Ltr #84-3

James G. Keppler, Regional Administrator  
Region III  
U.S. Nuclear Regulatory Commission  
799 Roosevelt Road  
Glen Ellyn, IL 60137

Updated Reportable Occurrence Report #83-78/03X-1, Docket #050-237 is being submitted to your office in accordance with Dresden Nuclear Power Station Technical Specification 6.6.B.2.(b), conditions leading to operation in a degraded mode permitted by a limiting condition for operation or plant shutdown required by a limiting condition for operation. This report is being submitted to revise the cause of the event.

D. J. Scott  
Station Superintendent  
Dresden Nuclear Power Station

DJS/kjl

Enclosure

cc: Director of Inspection & Enforcement  
Director of Management Information & Program Control  
U.S. NRC, Document Management Branch  
File/NRC

JAN 9 1984

*IE2211*

# SUPPLEMENT TO DVR

|         |     |       |      |       |
|---------|-----|-------|------|-------|
| DVR NO. | STA | UNIT. | YEAR | NO.   |
| D -     | 12  | - 2   | - 83 | - 156 |

|   |                                |                     |               |      |
|---|--------------------------------|---------------------|---------------|------|
| <b>PART 1</b>   | TITLE OF EVENT                 |                     | OCCURRED      |      |
|   | 1501-3A Failure to Open        |                     | 11/21/83      | 0515 |
|   | REASON FOR SUPPLEMENTAL REPORT |                     | DATE          | TIME |
|   | Revise cause of event.         |                     |               |      |
|   |                                |                     |               |      |
|   |                                |                     |               |      |
|   |                                |                     |               |      |
| <b>PART 2</b>   |                                |                     |               |      |
| ACCEPTANCE BY STATION REVIEW                                    | <u>J. Brunner</u>              | <u>Robert Almer</u> |               |      |
| DATE  | <u>1/4/84</u>                  | <u>1/4/84</u>       |               |      |
| SUPPLEMENTAL REPORT APPROVED<br>AND AUTHORIZED FOR DISTRIBUTION | <u>Douglas Rivers</u>          |                     | <u>1/4/84</u> |      |
|   | STATION SUPERINTENDENT         |                     | DATE          |      |

JAN 9 1984