LICENSEE EVENT REPORT

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

1 [G A C I H 2] (2) [0 0 0 0 0 0 0 0 0 0 0] (3) [4 1 1 1 1] (4) [ ] (5)
LICENSEE CODE | LICENSE NUMBER | LICENSE TYPE | CAT

CON'T
[ ]
REPORT SOURCE [L] (6) [0 5 0 0 0 3 6 6] (7) DOCKET NUMBER [0 7 1 8 7 9] (8) EVENT DATE [0 8 1 0 7 9] (9) REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

With the Reactor in the Run Mode, at 97% Power (thermal), it was discovered that HNP-2-3751 (Battery Pilot Cell Surveillance) was not performed on the required date (July 12, 1979) as specified by Technical Specifications 4.8.2.3.2.a and 4.8.1.1.3.a. A similar occurrence, concerning a missed surveillance, was reported in RO 50-366/1979-35. Public health and safety were not affected by this incident.

SYSTEM CODE [Z C] (11) | CAUSE CODE [A] (12) | CAUSE SUBCODE [C] (13) | COMPONENT CODE [Z Z Z Z Z Z] (14) | COMP. SUBCODE [Z] (15) | VALVE SUBCODE [Z] (16)

(17) LER/RO REPORT NUMBER: EVENT YEAR [7 9] | [—] | SEQUENTIAL REPORT NO. [0 8 9] | [/] | OCCURRENCE CODE [0 3] | REPORT TYPE [L] | [—] | REVISION NO. [0]

ACTION TAKEN [H] (18) | FUTURE ACTION [Z] (19) | EFFECT ON PLANT [Z] (20) | SHUTDOWN METHOD [Z] (21) | HOURS [0 0 0 0] (22) | ATTACHMENT SUBMITTED [N] (23) | NPRD-4 FORM SUB. [N] (24) | PRIME COMP. SUPPLIER [Z] (25) | COMPONENT MANUFACTURER [Z Z Z Z] (26)

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

The weekly surveillance, HNP-2-3751, was not performed on the required date due to personnel oversight. Upon discovery, the required surveillance was performed and found to be satisfactory on July 18, 1979. The responsible personnel were cautioned as to the importance of this surveillance and that it should be completed at the required time.

FACILITY STATUS [F] (28) | % POWER [0 9 7] (29) | OTHER STATUS (30) NA | METHOD OF DISCOVERY [B] (31) | DISCOVERY DESCRIPTION (32) Maintenance personnel observation

ACTIVITY RELEASED [Z] (33) | CONTENT OF RELEASE [Z] (34) | AMOUNT OF ACTIVITY (35) NA | LOCATION OF RELEASE (36) NA

PERSONNEL EXPOSURES
NUMBER [0 0 0] (37) | TYPE [Z] (38) | DESCRIPTION (39) NA

PERSONNEL INJURIES
NUMBER [0 0 0] (40) | DESCRIPTION (41) NA

LOSS OF OR DAMAGE TO FACILITY (43)
TYPE [Z] (42) | DESCRIPTION NA

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PUBLICITY
ISSUED [N] (44) | DESCRIPTION (45) NA

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