

## LICENSEE EVENT REPORT (LER)

(See reverse for required number of digits/characters for each block)

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: 50.0 HRS. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE INFORMATION AND RECORDS MANAGEMENT BRANCH (MNBB 7714), U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555-0001, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0104), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503.

FACILITY NAME (1)

CRYSTAL RIVER UNIT 3 (CR-3)

DOCKET NUMBER (2)

05000

PAGE (3)  
1 OF 20

TITLE (4)

Deficiency in Understanding of Technical Requirements Leads to Nonconservative Safety Systems Setpoint and Violations of Improved Technical Specifications

| EVENT DATE (5) |     |      | LER NUMBER (6) |                   |                 | REPORT NUMBER (7) |     |      | OTHER FACILITIES INVOLVED (8) |               |
|----------------|-----|------|----------------|-------------------|-----------------|-------------------|-----|------|-------------------------------|---------------|
| MONTH          | DAY | YEAR | YEAR           | SEQUENTIAL NUMBER | REVISION NUMBER | MONTH             | DAY | YEAR | FACILITY NAME                 | DOCKET NUMBER |
| 01             | 18  | 95   | 94             | -- 006            | -- 06           | 03                | 26  | 97   | FACILITY NAME                 | DOCKET NUMBER |
|                |     |      |                |                   |                 |                   |     |      |                               | 05000         |
|                |     |      |                |                   |                 |                   |     |      | FACILITY NAME                 | DOCKET NUMBER |
|                |     |      |                |                   |                 |                   |     |      |                               | 05000         |

  

|                    |     |   |                  |                      |  |
|--------------------|-----|---|------------------|----------------------|--|
| OPERATING MODE (9) | 1   | THIS REPORT IS SUBMITTED PURSUANT TO THE REQUIREMENTS OF 10 CFR §: (Check one or more) (11) |                  |                      |  |
| POWER LEVEL (10)   | 100 | 20.402(b)   | 20.405(c)        | 50.73(a)(2)(iv)      | 73.71(b)   |
|                    |     | 20.405(a)(1)(i)   | 50.36(c)(1)      | 50.73(a)(2)(v)       | 73.71(c)   |
|                    |     | 20.405(a)(1)(ii)  | 50.36(c)(2)      | 50.73(a)(2)(vii)     | OTHER  |
|                    |     | 20.405(a)(1)(iii)   | X 50.73(a)(2)(i) | 50.73(a)(2)(viii)(A) | (Specify in Abstract below and in Text, NRC Form 366A) |
|                    |     | 20.405(a)(1)(iv)  | 50.73(a)(2)(ii)  | 50.73(a)(2)(viii)(B) |  |
|                    |     | 20.405(a)(1)(v)   | 50.73(a)(2)(iii) | 50.73(a)(2)(x)       |  |

## LICENSEE CONTACT FOR THIS LER (12)

NAME

James A. Frijouf, Sr. Nuclear Regulatory Specialist

TELEPHONE NUMBER (Include Area Code)

(352) 563-4754

## COMPLETE ONE LINE FOR EACH COMPONENT FAILURE DESCRIBED IN THIS REPORT (13)

| CAUSE | SYSTEM | COMPONENT | MANUFACTURER | REPORTABLE TO NRRDS | CAUSE | SYSTEM | COMPONENT | MANUFACTURER | REPORTABLE TO NRRDS |
|-------|--------|-----------|--------------|---------------------|-------|--------|-----------|--------------|---------------------|
|       |        |           |              |                     |       |        |           |              |                     |
|       |        |           |              |                     |       |        |           |              |                     |

## SUPPLEMENTAL REPORT EXPECTED (14)

|  |   |    |                               |       |     |      |
|--|---|----|-------------------------------|-------|-----|------|
| YES<br>(If yes, complete EXPECTED SUBMISSION DATE) | X | NO | EXPECTED SUBMISSION DATE (15) | MONTH | DAY | YEAR |
|  |   |    |                               |       |     |      |

## ABSTRACT (Limit to 1400 spaces, i.e., approximately 15 single-spaced typewritten lines) (16)

On October 6, 1994, Florida Power Corporation's (FPC) Crystal River Unit 3 (CR-3) was in MODE ONE (POWER OPERATION), operating at 100% power. It was determined that the potential existed for CR-3 to have operated outside plant Improved Technical Specifications (ITS) relative to the Reactor Protection System (RPS) setpoints. FPC personnel were reviewing a revised calculation when it was discovered that RPS setpoints may not be conservative relative to ITS. A further review of RPS setpoints determined that the Variable Low Pressure Trip (VLPT) setpoint was set at the ITS limit without provision for instrument error. The Shutdown Bypass trip setpoint was also found to be set at its ITS limit. This condition is reportable in accordance with 10 CFR 50.73(a)(2)(i)(B). The remainder of the RPS trip setpoints were determined to be in compliance with ITS requirements. Subsequent evaluations determined that one Emergency Feedwater Initiation and Control System (EFIC) setpoint, two Engineered Safeguards Actuation System Bypass bistable setpoints, and instruments used to monitor Reactor Coolant System (RCS) total flow were also potentially non-conservative relative to ITS. The cause of these events was personnel error. Corrective actions include: implementation of a setpoint action plan encompassing recalibration, procedure changes, and assuring adequate setpoints for other actuation systems.

REQUIRED NUMBER OF DIGITS, CHARACTERS  
FOR EACH BLOCK

| BLOCK<br>NUMBER | NUMBER OF<br>DIGITS/CHARACTERS  | TITLE                        |
|-----------------|---|------------------------------|
| 1               | UP TO 46  | FACILITY NAME                |
| 2               | 8 TOTAL<br>3 IN ADDITION TO 05000   | DOCKET NUMBER                |
| 3               | VARIES  | PAGE NUMBER                  |
| 4               | UP TO 76  | TITLE                        |
| 5               | 6 TOTAL<br>2 PER BLOCK  | EVENT DATE                   |
| 6               | 7 TOTAL<br>2 FOR YEAR<br>3 FOR SEQUENTIAL NUMBER<br>2 FOR REVISION NUMBER             | LER NUMBER                   |
| 7               | 6 TOTAL<br>2 PER BLOCK  | REPORT DATE                  |
| 8               | UP TO 18 -- FACILITY NAME<br>8 TOTAL -- DOCKET NUMBER<br>3 IN ADDITION TO 05000       | OTHER FACILITIES INVOLVED    |
| 9               | 1   | OPERATING MODE               |
| 10              | 3   | POWER LEVEL                  |
| 11              | 1<br>CHECK BOX THAT APPLIES   | REQUIREMENTS OF 10 CFR       |
| 12              | UP TO 50 FOR NAME<br>14 FOR TELEPHONE   | LICENSEE CONTACT             |
| 13              | CAUSE VARIES<br>2 FOR SYSTEM<br>4 FOR COMPONENT<br>4 FOR MANUFACTURER<br>NPRDS VARIES | EACH COMPONENT FAILURE       |
| 14              | 1<br>CHECK BOX THAT APPLIES   | SUPPLEMENTAL REPORT EXPECTED |
| 15              | 6 TOTAL<br>2 PER BLOCK  | EXPECTED SUBMISSION DATE     |