

NUCLEAR POWER BUSINESS UNIT
OPERATIONS REFUELING TESTS

ORT 71
MINOR
Revision 7
January 31, 1997

ELECTRICAL PENETRATION LEAK TEST
UNIT 2

Date _____
DSS _____

RECORD

PROCEDURE VERIFIED CURRENT AND CHECKED FOR TEMPORARY CHANGES. IF FIELD
COPIES REQUIRED, USE PBF-0026; LAW NP 1.2.4 AND DO NOT COMPLETE THIS BLOCK.

BY: _____ DATE: _____

1.0 PURPOSE

The purpose of ORT 71 is to perform a refueling interval leakage test of penetration E58 in
Pipeway No. 4.

2.0 REFERENCES

IR 96-006, NRC Inspection Report, NRC Commitment for Operations procedure PMT/QC
reviews.

3.0 PRECAUTIONS AND LIMITATIONS

All electrical penetrations must be leak tested with nitrogen.

4.0 INITIAL CONDITIONS

INITIALS

4.1 This test may be performed individually or in conjunction with ORT 80.

4.2 **Permission to Perform Test**

The conditions required by this test are consistent with required plant
conditions including equipment operability. Permission is granted to
perform this test.

DSS _____ Time _____ Date _____

5.0 PROCEDURE

NOTE: This penetration must be leak tested with nitrogen.

5.1 Open the isolation valve downstream of pressure gauge for the penetration
to be tested and remove the test cap.

5.2 Remove the pressure gauge and valve assembly.

ELECTRICAL PENETRATION LEAK TEST
UNIT 2

INITIALS

NOTE: Minimize the amount of time the leak rate tester is connected to the mechanical penetration.

5.3 Connect the test rig to the penetration test connection and test per OI-58. _____

5.4 Upon completion of the test, vent the penetration per OI-58. _____

5.5 Disconnect the test rig and replace the pressure gauge and Whitey valve assembly. _____

5.6 Repressurize the penetration to 15 psig. Close the isolation valve and replace the test cap. _____

PMT

5.7 Snoop all disturbed fittings for leakage and tighten/initiate work order, as required. _____

6.0 EVALUATION

To be completed by manager - Operations or his representative.

6.1 Individual leakages compared to allowable value and included in tabulation of total leak rate. _____

6.2 Results acceptable, not exceeded.

Yes _____ No _____

If no, give details in the remarks section and notify the manager - Regulatory and Support Services to determine reportability.

6.3 Data Analyzed By _____

Date _____

Remarks:

ELECTRICAL PENETRATION LEAK TEST
UNIT 2

LEAK TEST DATA SHEET

Penetration E58

<u>Time</u>	<u>Pressure</u> <u>(psig)</u>	<u>Leak Rate</u> <u>(sccm)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Test Instrument ID _____ Range (circle one): Low Mid High

Comments:

Test Operator _____ Date _____