

LICENSEE EVENT REPORT

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

P A T M I 2 (2) 0 0 - 0 0 0 0 0 - 0 0 0 3 4 1 1 1 1 4 _____ (5)
 7 8 9 LICENSEE CODE 14 15 LICENSE NUMBER 23 26 LICENSE TYPE 30 37 CAT 58

CON'T
 REPORT SOURCE L (6) 0 5 0 0 0 3 2 0 7 1 1 2 0 5 7 9 8 0 1 1 5 8 0 9
 7 8 60 61 DOCKET NUMBER 68 69 EVENT DATE 74 75 REPORT DATE 80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

On 12/5/79 Diesel Generator (DF-X-1B) tripped 20 seconds after a manual start
 attempt due to low lube oil pressure. The failure posed no threat to continued
 core cooling; since the redundant diesel generator was verified operable, offsite
 power was available, the BOP diesel generators were operable, and the 13,2KV
 alternate feed was available. This event is reportable under T.S. 6.9.1.9.c
 as described in T.S. 3.8.1.1.

 7 8 9

SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP SUBCODE VALVE SUBCODE
 E E (11) D (13) Z (13) Z Z Z Z Z (14) Z (15) Z (16)
 9 10 11 12 13 16 19 20

LER NO REPORT NUMBER (17) 7 9
 27 32
 EVENT YEAR 7 9
 27 32
 SEQUENTIAL REPORT NO. 0 2 1
 23 26 27
 OCCURRENCE CODE 0 3
 28 29 30
 REPORT TYPE L
 30 31
 REVISION NO. 0
 32 33

ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS (22) ATTACHMENT SUBMITTED NPRO-4 CRAM SUB PRIME COMP. SUPPLIER COMPONENT MANUFACTURER
 G (18) N (19) Z (20) Z (21) 0 0 0 0 0 (23) N (24) L (25) X 9 9 9 (26)
 33 34 35 36 37 40 41 47 43 44 47

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (21)

The failure appeared to be due to low lube oil level. The lube oil level was
 restored to the full level and the diesel was satisfactorily tested. Appropriate
 procedures are being revised to insure adequate lube oil level prior to starting
 the diesel generators.

 7 8 9

FACILITY STATUS POWER OTHER STATUS (30) METHOD OF DISCOVERY DISCOVERY DESCRIPTION (32)
 G (28) 0 0 0 (29) NA (31) Operator Observation (32)
 7 8 9 10 11 12 13 17 44 45 46

ACTIVITY COMPONENT RELEASED OR RELEASE AMOUNT OF ACTIVITY (35) LOCATION OF RELEASE (36)
 Z (33) Z (34) NA (35) NA (36)
 7 8 9 10 11 44 45 46

PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION (39) NA
 0 0 0 (37) Z (38)
 7 8 9 10 11 12 13

PERSONNEL INJURIES NUMBER DESCRIPTION (41) NA
 0 0 0 (40)
 7 8 9 10 11 12

LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION (43) NA
 Z (42)
 7 8 9 10 11 12

PUBLICITY ISSUES DESCRIPTION (45) NA
 Z (44)
 7 8 9 10 11 12

NAME OF PREPARER C. F. McPhatter PHONE (717) 948-8552
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