

STATE OF OREGON
MONITORING WELL REPORT
 (as required by ORS 537.765 & OAR 690-240-095)

WASH 55122

L 25869
 Start Card # 172078

Instructions for completing this report are on the last page of this form.

(1) OWNER/PROJECT: WELL NO. DMW-8A
 Name Burlington Cas. Plaza C/O Harsch Inv. Corp.
 Address 1121 SW Salmon
 City Portland State OR Zip 97205

(2) TYPE OF WORK:

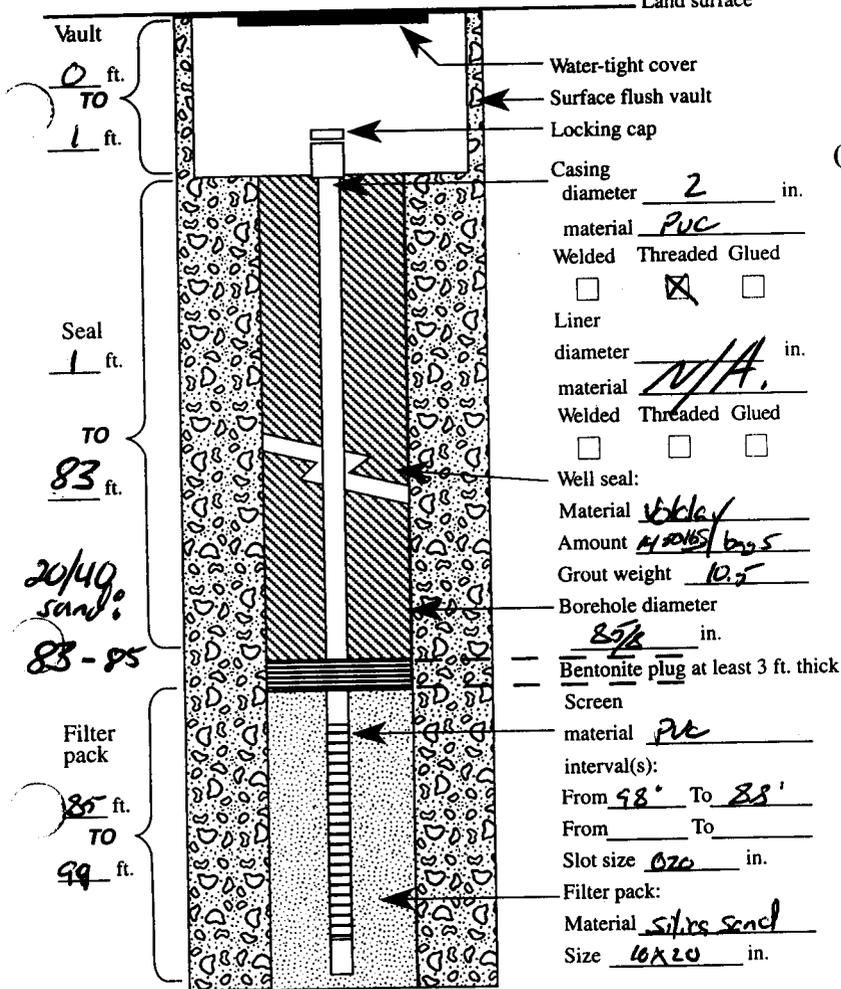
- New construction Alteration (Repair/Recondition)
 Conversion Deepening Abandonment

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(3) DRILLING METHOD
 Rotary Air Rotary Mud Cable
 Hollow Stem Auger Other _____

(6) LOCATION OF WELL By legal description
 Well Location: County Washington
 Township 15 (N or S) Range 1W (E or W) Section 27
 1. NE 1/4 of SE 1/4 of above section.
 2. Either Street address of well location Beaverton, OR 97005 SW Cascade Ave
 or Tax lot number of well location 500
 3. ATTACH MAP WITH LOCATION IDENTIFIED. Map shall include approximate scale and north arrow.

(4) BORE HOLE CONSTRUCTION
 Special Standards Yes No
 Depth of completed well 99' ft. Land surface



(7) STATIC WATER LEVEL:
7' Ft. below land surface. Date 7/14/99
 Artesian Pressure _____ lb/sq. in. Date _____

(8) WATER BEARING ZONES:
 Depth at which water was first found _____

From	To	Est. Flow Rate	SWL
<u>88</u>	<u>98</u>	<u>~56 Pm.</u>	

(9) WELL LOG: Ground elevation _____

Material	From	To	SWL
<u>lt. brown SILT</u>	<u>0</u>	<u>20</u>	
<u>black BASALT, slightly weathered, few vesicles</u>	<u>20</u>	<u>51</u>	
<u>lt. brown SILT with basalt gravels</u>	<u>51</u>	<u>55</u>	
<u>black BASALT, slightly weathered - no water</u>	<u>55</u>	<u>85</u>	
<u>red-black SILT</u>	<u>85</u>	<u>88</u>	
<u>red-black BASALT, slightly weathered, water producing</u>	<u>88</u>	<u>98</u>	
<u>black BASALT, fresh - slightly weathered, no water</u>	<u>98</u>	<u>99</u>	
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WATER RESOURCES DEPT. SALEM, OREGON			

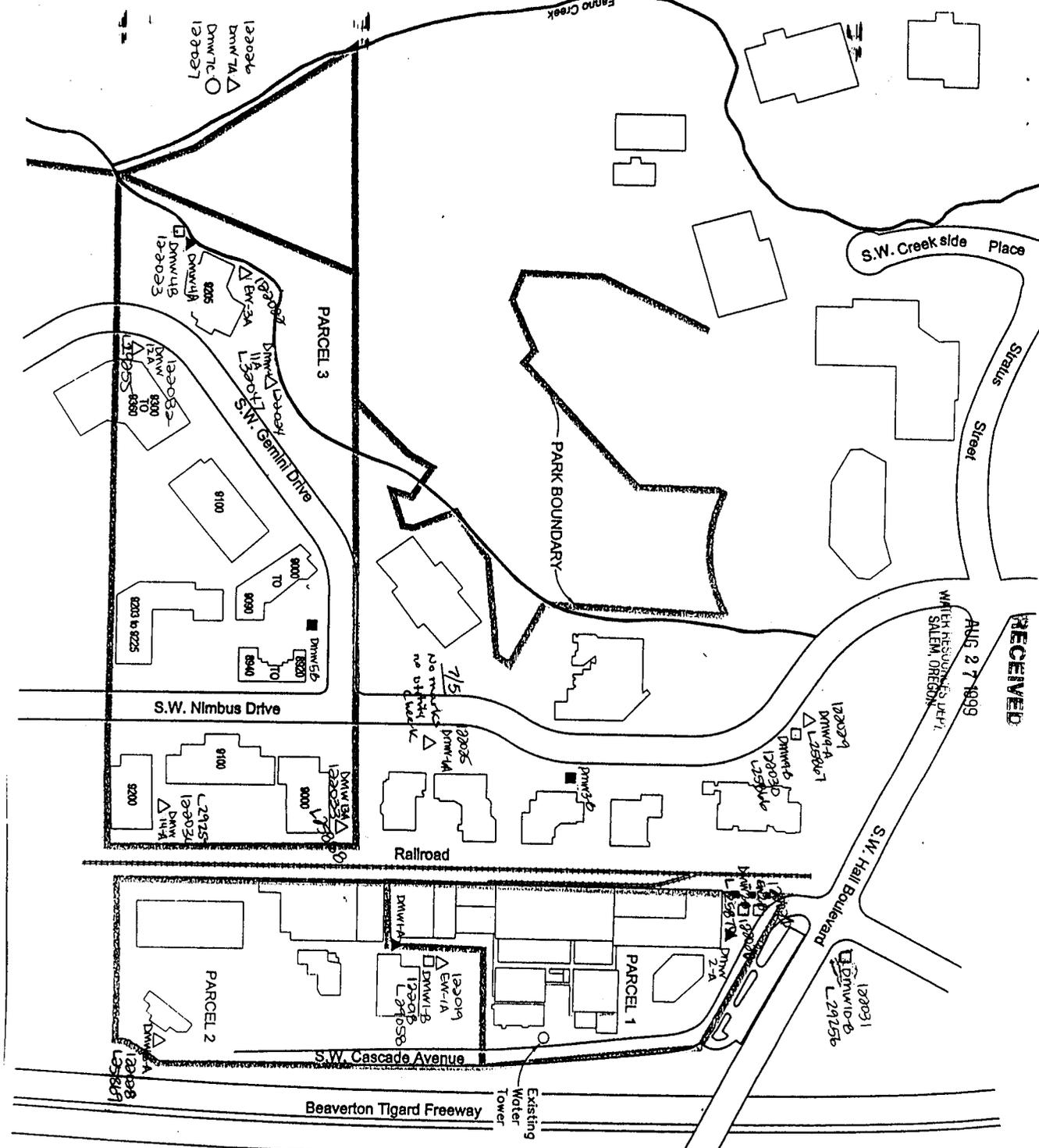
Date started 7-13-99 Completed 7-14-99

(unbonded) Monitor Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to the best knowledge and belief.
 MWC Number 10464
 Signed [Signature] Date 7-14-99

(bonded) Monitor Well Constructor Certification:
 I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.
 MWC Number 10024
 Signed [Signature] Date 8/23/99
 SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

(5) WELL TEST:
 Pump Bailer Air Flowing Artesian
 Permeability _____ Yield _____ GPM
 Conductivity _____ PH _____
 Temperature of water 56 °F Depth artesian flow found _____ ft.
 Was water analysis done? Yes No
 By whom? _____
 Depth of strata to be analyzed. From _____ ft. to _____ ft.
 Remarks: _____

Name of supervising Geologist/Engineer
OR9093 ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT



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KEY

- Existing Well
- Proposed Well
- △ Fire Hydrant



Note:

Locations for EW-1, 2, 3 and DMW-11A are preliminary. Final locations to be based on ongoing characterization of shallow contamination and CRBG groundwater gradients.

DR9093
 LANDAU

