

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

wash
 55166

Well ID# L32049

Start Card # 122022

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

(1) OWNER/PROJECT: WELL NO. EW-3A
 Name PS Business Parks Attn: Daray Duffly
 Address 8905 SW Nimbus Ave Suite 210
 City Beaverton State OR Zip 97009

(6) LOCATION OF WELL By legal description
 Well Location: County Washington
 Township 1S (N or S) Range 1W (E or W) Section 27
 1. NW 1/4 of SE 1/4 of above section.

(2) TYPE OF WORK:
 New construction
 Conversion
 Alteration (Repair, etc.)
 Deepening
 Abandonment

2. Either Street address of well location
9205 SW Gemini, Beaverton
 or Tax lot number of well location 500

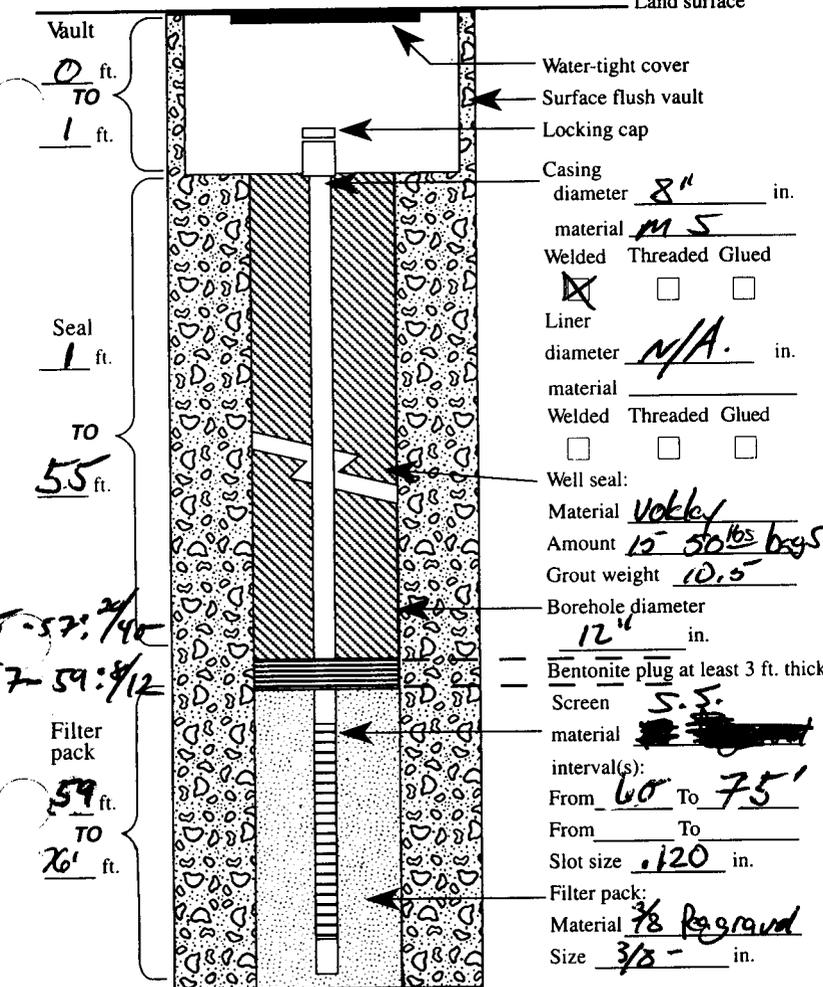
(3) DRILLING METHOD
 Rotary Air
 Hollow Stem Auger
 Rotary Mud
 Other

(7) STATIC WATER LEVEL:
4.5 Ft. below land surface. Date 8/19/99
 Artesian Pressure _____ lb/sq. in. Date _____

(4) BORE HOLE CONSTRUCTION
 Special Standards Yes No
 Depth of completed well 90' ft.

(8) WATER BEARING ZONES:
 Depth at which water was first found 14'

From	To	Est. Flow Rate
<u>48</u>	<u>90</u>	<u>~26 GPM</u>



(9) WELL LOG: Ground elevation _____

Material	From	To	SWL
<u>brown silty F. GRAVEL (fill)</u>	<u>0</u>	<u>4</u>	
<u>DK brown silty F. SAND</u>	<u>4</u>	<u>12</u>	
<u>black BASALT, fresh-slightly weathered little water</u>	<u>12</u>	<u>48</u>	
<u>black BASALT, fractured, slightly weathered, hard water producing</u>	<u>48</u>	<u>50</u>	
<u>black BASALT, fractured little to no water production</u>	<u>50</u>	<u>70</u>	
<u>black BASALT, fractured water producing</u>	<u>60</u>	<u>73</u>	
<u>black BASALT, fractured little to no water</u>	<u>73</u>	<u>90</u>	
<u>Bentonite chips 3/8</u>	<u>76</u>	<u>90</u>	

(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 N/A ft. to _____ ft.
 Remarks: _____

(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.
 Signed [Signature] MWC Number 10464
 Date 8/19/99

(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.
 Signed [Signature] MWC Number 10024
 Date 8/27/99

