

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

WASH
 55298

Well ID# L32050

Start Card # 122025

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

(1) OWNER/PROJECT: WELL NO. Dmw-6A
 Name Chatty C. Elison Trust 90 Insignia/Est
 Address 10240 SW Nimbus Ave Ste L3
 City Beaverton State OR Zip 97008

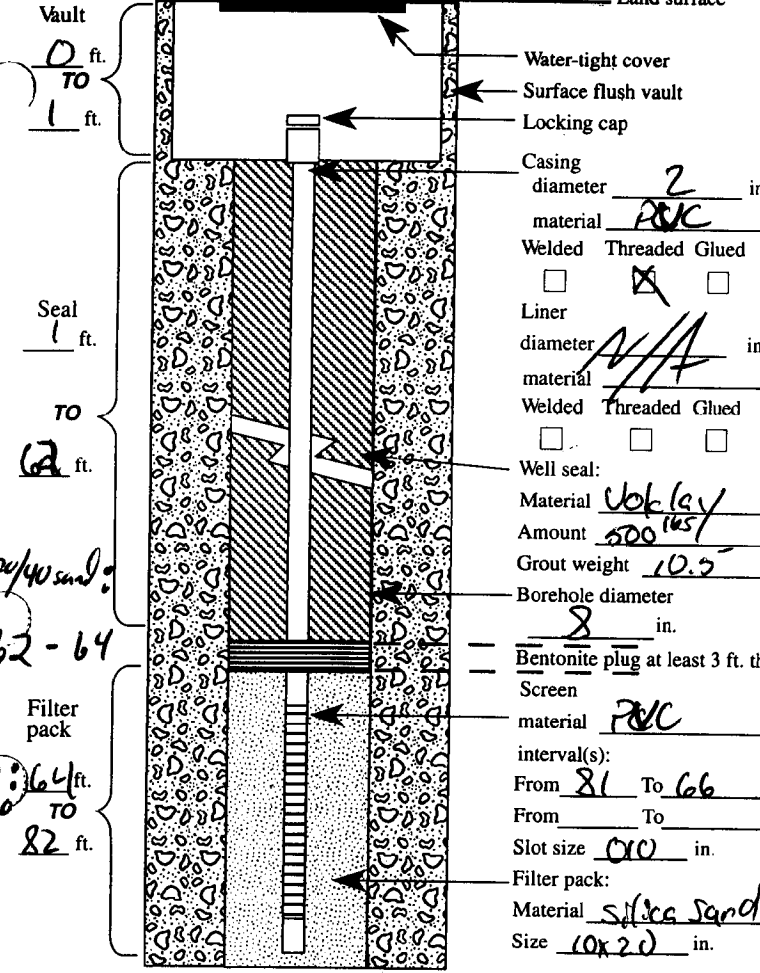
(6) LOCATION OF WELL By legal description
 Well Location: County Washington
 Township 15 (N or S) Range 1W (E or W) Section 27
 1. SE 1/4 of NE 1/4 of above section.
 2. Either Street address of well location Beaverton, OR
8900 SW Nimbus Dr.
 or Tax lot number of well location 600

(2) TYPE OF WORK:
 New construction Alteration (Repair/Replacement)
 Conversion Deepening Abandonment

(3) DRILLING METHOD SEP 27 1999
 Rotary Air Rotary Mud Cable
 Hollow Stem Auger Other _____

(7) STATIC WATER LEVEL:
27.78 Ft. below land surface. Date 8/26/99
 Artesian Pressure _____ lb/sq. in. Date _____

(4) BORE HOLE CONSTRUCTION
 Special Standards Yes No
 Depth of completed well 85 ft. Land surface



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

From	To	Est. Flow Rate	DATE
58	80	206 gpm	OCT 28 1999

(9) WELLLOG: Ground elevation _____

Material	From	To	SWL
BROWN sandy SILT with clay	0	11	
Dark gray SILT with clay & sand	11	19	
black BASALT, phaneritic, predominately decomposed	19	24	
black BASALT, slightly weathered, no water	24	53	
brown silty BASALT	53	56	
black BASALT, slightly weathered, no water	56	58	
black BASALT, slightly weathered, water production	58	80	
black BASALT, fresh-slightly weathered, no water production	80	85	
⊕ Bent. chyls	80'	85'	

Date started 8/25/99 Completed 8/26/99

(5) WELL TEST:
 Pump Bailer Air Flowing Artesian
 Permeability _____ Yield _____ GPM
 Conductivity _____ PH _____
 Temperature of water 56 °F/C Depth artesian flow found _____ ft.
 Was water analysis done? Yes No
 By whom? _____
 Depth of strata to be analyzed. From _____ 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 9-20-99

(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 9.20.99

