

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

WASH
 55299

WELL .D.# L32052

Start Card # 122027

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

(1) OWNER/PROJECT: WELL NO. DMW-7C
 Name Tualatin Hills Park + Rec. District
 Address 15707 SW Walker Rd
 City Beaverton State OR Zip 97007

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

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

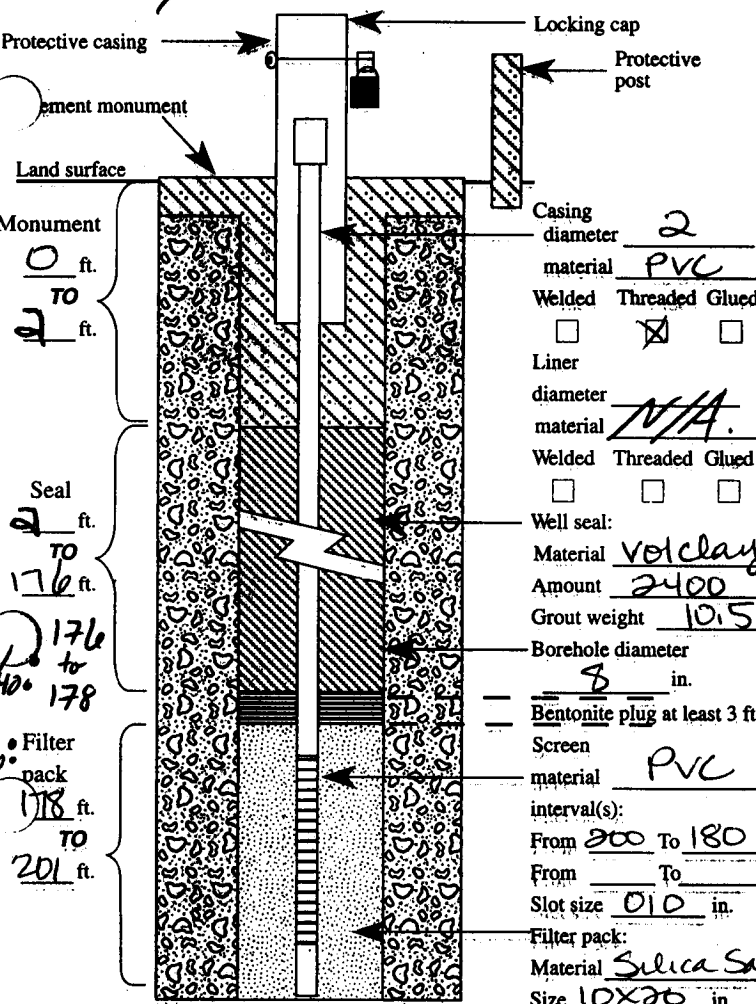
2. Either Street address of well location
Greenway Park Beaverton, OR
 or Tax lot number of well location N/A

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

3. ATTACH MAP WITH LOCATION IDENTIFIED. Map shall include approximate scale and north arrow.
 (7) STATIC WATER LEVEL:
21.7 Ft. below land surface. Date 8/27/99
 Artesian Pressure _____ lb/sq. in. Date _____

(4) BORE HOLE CONSTRUCTION

Special Standards Yes No
 Depth of completed well 20 ft.



(8) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Est. Flow Rate	SWL
180	205	~206 PM	

(9) WELL LOG: Ground elevation _____

Material	From	To	SWL
Dark Gray silty clay to clayey silt	0	10	
Dark blue gray sandy silt to silty sand	10	49	
Brown basalt, predominately decomposed, no water	49	97	
Gray basalt, moderately weathered, water production	97	110	
Red brown basalt, mod. predominate weathering, no water production	110	180	
Red brown basalt, mod. weathering, water prod.	180	200	
Red Bek Basalt, mod. weathered, no water produce	200	205	
<input checked="" type="checkbox"/> Bentonite chips (hydrated)	201	205	

Date started 8/27/99 Completed 8/31/99

(5) WELL TEST:

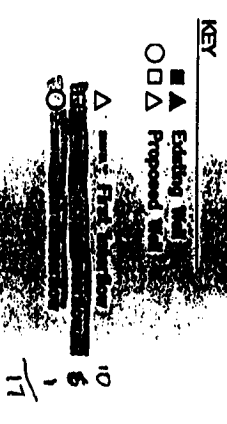
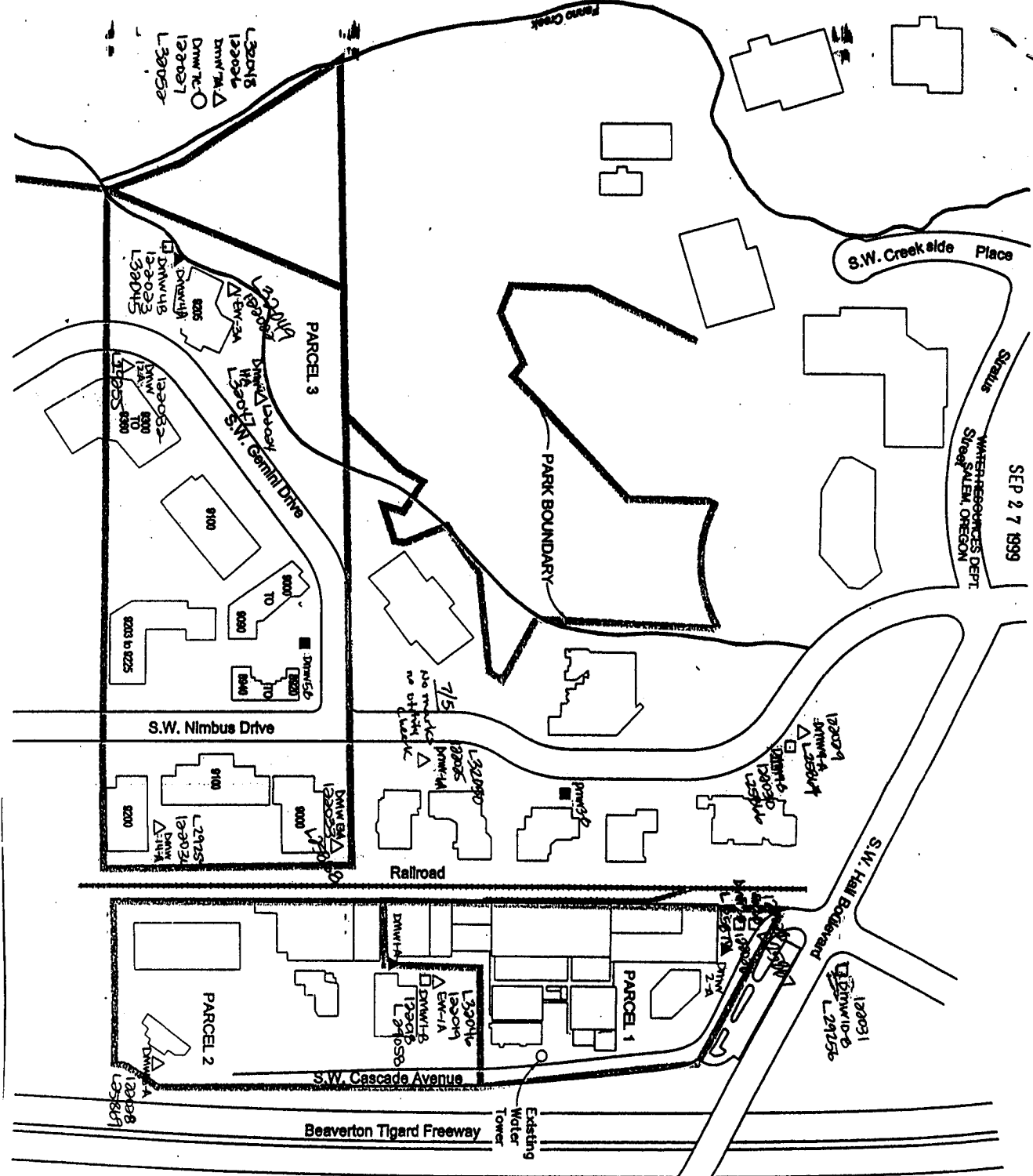
Pump Bailer Air Flowing Artesian
 Permeability _____ Yield _____ GPM
 Conductivity _____ PH _____
 Temperature of water 56 °F Depth artesian flow found _____ ft.
 Was water analysis done? Yes No
 By whom? _____
 Depth of strata to be analyzed. From N/A ft. to _____ ft.
 Remarks: _____

(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.
 MWC Number 10432
 Signed [Signature] Date 9/21/99

(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 9/22/99
 SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

SEP 27 1999

WATER RESOURCES DEPT.
STREET SALEM, OREGON



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**

