

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

WASH
 55300

WELL I.D.# L32048

Start Card # 122026

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

(1) OWNER/PROJECT: WELL NO. DMW-7A
 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.

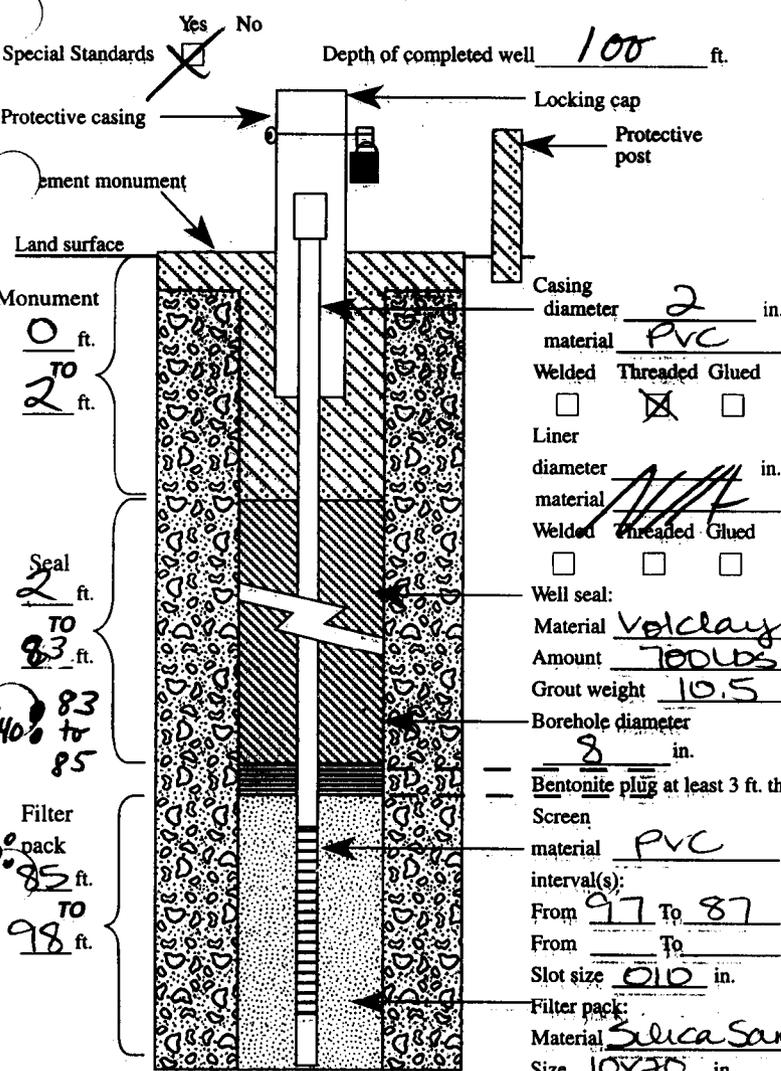
(2) TYPE OF WORK:
 New construction
 Conversion
 Alteration (Repair/Recondition)
 Deepening

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

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

(7) STATIC WATER LEVEL:
7.5 Ft. below land surface. Date 8/31/99
 Artesian Pressure _____ lb/sq. in. Date _____

(4) BORE HOLE CONSTRUCTION



(8) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Est. Flow Rate	SWL
<u>92</u>	<u>97</u>	<u>230 GPM</u>	

(9) WELLLOG: Ground elevation _____

Material	From	To	SWL
<u>Brn Silt Clay</u>	<u>0</u>	<u>11</u>	
<u>Dark gray silty fine sand</u>	<u>11</u>	<u>48</u>	
<u>Dark gray basalt</u>	<u>48</u>	<u>80</u>	
<u>predominately decomposed</u>			
<u>Soft, no water prod.</u>			
<u>Blk basalt, slight</u>	<u>80</u>	<u>83</u>	
<u>weathered, no water</u>			
<u>dark gray basalt</u>	<u>83</u>	<u>92</u>	
<u>predominately decomposed</u>			
<u>Soft, some water</u>			
<u>Blk Basalt, slightly</u>	<u>92</u>	<u>97</u>	
<u>weathered, water</u>			
<u>producing</u>			
<u>Brn-Blk basalt,</u>	<u>97</u>	<u>100</u>	
<u>Moderately weathered</u>			
<u>Fractured, no to some</u>			
<u>water</u>			
<u>Bentonite chips (hydrated)</u>	<u>98</u>	<u>100</u>	

Date started 8/31/99 Completed 9/1/99

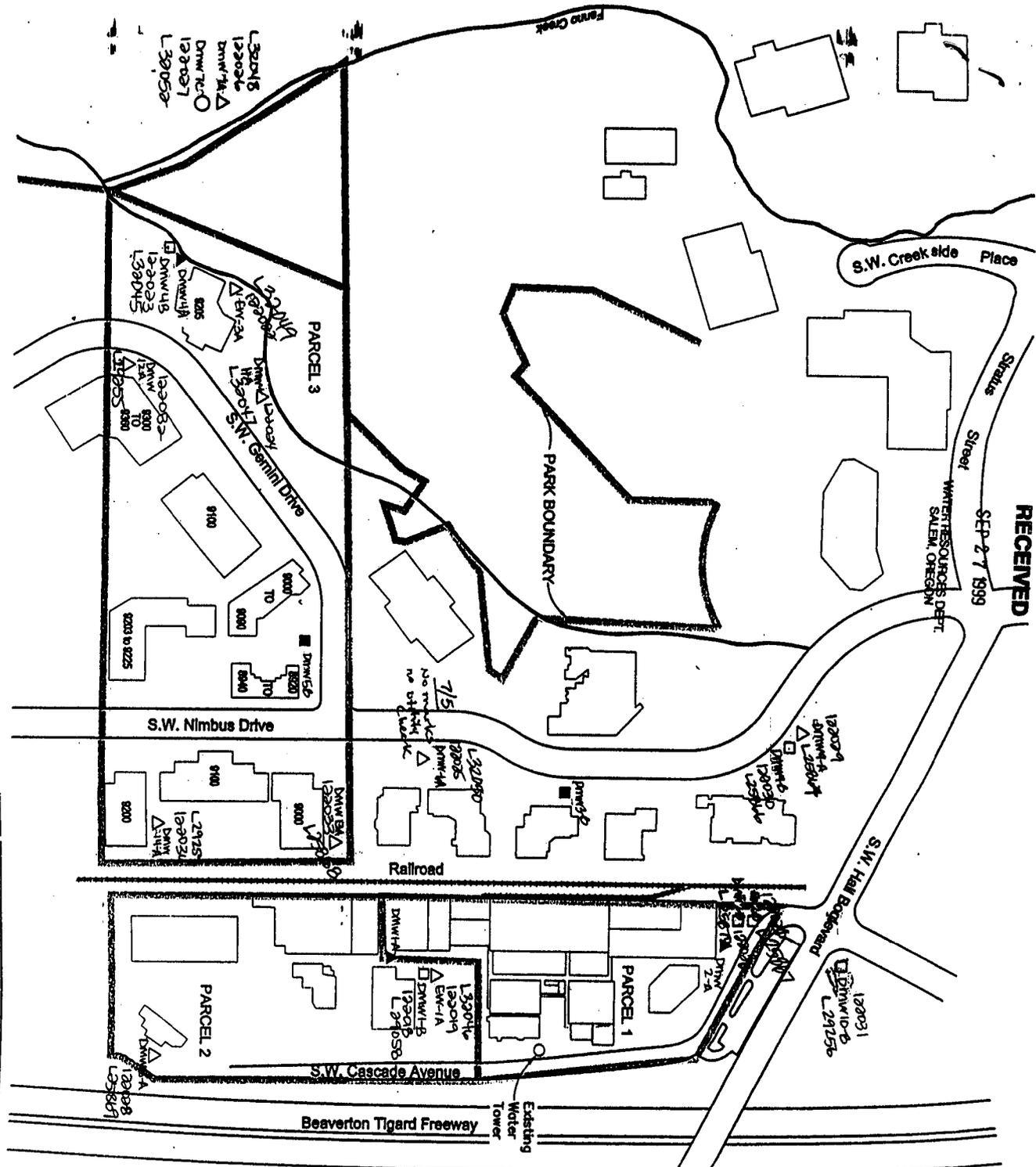
(5) WELL TEST:
 Pump Bailer Air Flowing Artesian
 Permeability _____ Yield _____ GPM
 Conductivity _____ PH _____
 Temperature of water 57.0 F/C Depth artesian flow found _____ ft.
 Was water analysis done? Yes No
 By whom? _____
 Depth of strata to be analyzed. From N/A _____ ft.
 Remarks: _____
 Name of supervising Geologist/Engineer _____

(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 _____ Date 9/2/99

(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 _____ Date 9/28/99

RECEIVED
SEP-27 1999

WRITER RESOURCES DEPT.
SALEM, OREGON



KEY

- Existing Well
- Proposed Well



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

