

PORT. 006-137

(17) Mult 87532

STATE OF OREGON
GEOTECHNICAL HOLE REPORT
(as required by OAR 690-240-0035)

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

(1) OWNER/PROJECT Hole Number H2-17
Name AIRCRAFT MGMT CENTER/PORTLAND INTL AIRPORT
Address 4635 NE CORNFOT RD
City PORTLAND State OR Zip 98020

(2) TYPE OF WORK
 New Deepening Alteration (repair/recondition) Abandonment

(3) CONSTRUCTION
 Rotary Air Hand Auger Hollow Stem Auger
 Rotary Mud Cable Tool Push Probe Other _____

(4) TYPE OF HOLE
 Uncased Temporary Cased Permanent
 Uncased Permanent Slope Stability Other _____

(5) USE OF HOLE Soil & gas sampling

(6) BORE HOLE CONSTRUCTION
Special Construction approval: Yes No Depth of Completed Well 8 ft.

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
2	0	8	chips	8	1	25163
			concrete	1	0	10163

Backfill placed from 8 ft. to 0 ft. Material chips
Filter Pack placed from _____ ft. to _____ ft. Size of pack _____

(7) CASING/SCREEN

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screen:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Slot size _____

(8) WELL TEST
 Pump Bailer Air Flowing Artesian
Permeability _____ Yield _____ GPM _____
Conductivity _____ PH _____
Temperature of water _____ °F/C Depth artesian flow found _____ ft.
Was a water analysis done? Yes No
By whom _____

Depth of water table _____ ft.
Remarks: _____

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(9) LOCATION OF HOLE (legal description)
County MULTNOMAH
Tax Lot 100 Lot _____
Township 1N N or S Range 2E E or W WM
Section 7 SW 1/4 _____ 1/4 _____

Lat _____ ° _____ ' _____ " or 45.57 (degrees or decimal)
Long _____ ° _____ ' _____ " or -122.01 (degrees or decimal)

Street Address of Well (or nearest address) 4635 NE CORNFOT ROAD
PORTLAND, OREGON

Map with location identified must be attached.

(10) STATIC WATER LEVEL
n/a ft. below land surface. Date 1-7-07
Artesian pressure _____ lb. per square inch Date _____

(11) SUBSURFACE LOG

Material Description	Ground Elevation		SWL
	From	To	
<u>sand</u>	<u>0</u>	<u>8</u>	

Date Started 1-7-07 Completed 1-7-07

(12) ABANDONMENT LOG

Material Description	From	To	Sacks or Pounds
<u>chips</u>	<u>8</u>	<u>1</u>	<u>25163</u>
<u>fast setting concrete</u>	<u>1</u>	<u>0</u>	<u>10163</u>

Date Started 1-7-07 Completed 1-7-07

PROFESSIONAL CERTIFICATION
(to be signed by a licensed water supply or monitoring well constructor, or Oregon registered geologist or civil engineer.)

I accept responsibility for the construction, alteration, or abandonment work performed during the construction dates reported above. All work performed during this time is in compliance with Oregon's geotechnical hole construction standards. This report is true to the best of my knowledge and belief.

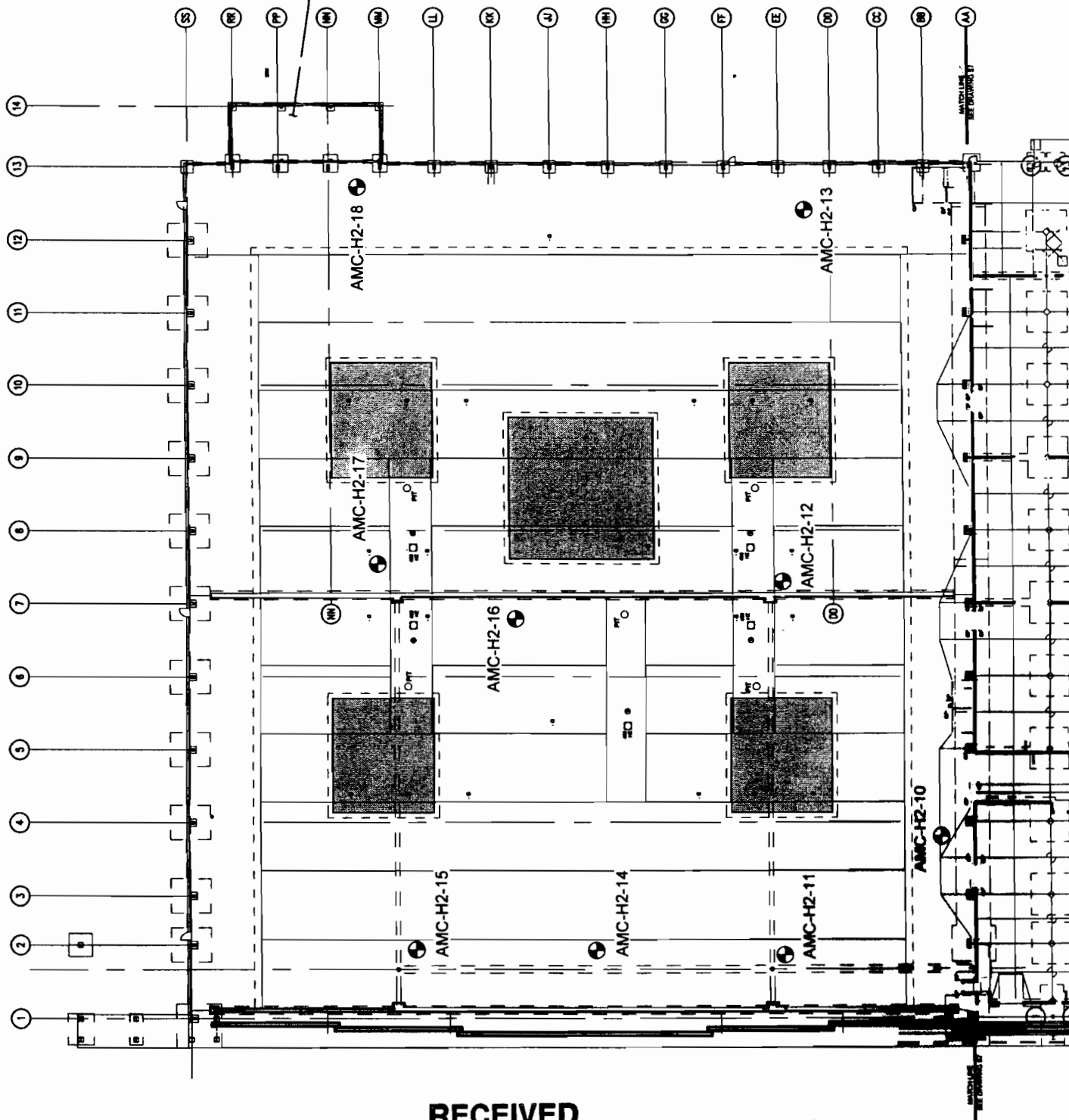
License or Registration Number 10423
Signed [Signature] Date 1-7-07

Affiliation CASCADE DRILLING, INC. OREGON

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

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Boeing Portland | V:\0251180\010\DIR\Report\Fig_3.dwg (A) "Figure 3" 1/2/2007



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SALEM, OREGON

