

NATIONAL TRANSPORTATION SAFETY BOARD PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT REPORT

This form to be used for reporting civil and public use aircraft accidents and incidents

BASIC INFORMATION

Accident/Incident Location

Nearest City/Place: The Dalles State: OR
 ZIP: 97040 Country: USA
 Latitude: 45.6185 (dd:mm:ss N/S) Longitude: 121.167 (ddd:mm:ss E/W)

Date/Time

Date: Mar 31 2017 Local Time: Approx 5 pm
mm/dd/yyyy Time Zone: Pacific

Phase of Operation

☐ Standing ☐ Takeoff (incl. initial climb) ☐ Cruise ☐ Hover
☐ Taxi ☐ Climb ☐ Maneuvering ☐ Other
☐ Descent ☒ Landing ☐ Approach ☐ Unknown

Collision with Other Aircraft

☐ Midair
☐ On-ground
☒ None

Altitude of In-Flight Occurrence

3500 ft MSL

AIRCRAFT INFORMATION

Manufacturer: Louis W. Ott

Model: 601XL-B

Serial Number: 6-7884

Registration Number: N610TT

Amateur-built: ☒ Yes ☐ No

Max Gross Weight: 1320 lbs

Weight at Time of Accident/Incident: 1285 lbs

Location of Center of Gravity at Time of Accident/Incident:

15.2 inches from ☐ nose or ☒ datum
 -or- _____ Percent Mean Aerodynamic Cord (% MAC)

Category of Aircraft

☒ Airplane
☐ Balloon
☐ Blimp/Dirigible
☐ Glider
☐ Gyrocraft
☐ Helicopter
☐ Powered lift
☐ Ultralight
☐ Unknown

Type of Airworthiness Certificate (Check all that apply)

Standard

☒ Normal
☐ Utility
☐ Acrobatic
☐ Transport

Special

☐ Restricted
☐ Limited
☐ Provisional
☒ Experimental
☐ Special Flight
☒ Light Sport

Number of Seats: 2

If Large Aircraft, how many seats for:

Flight Crew: _____

Cabin Crew: _____

Passengers: _____

Landing Gear ☐ Retractable

Check any additional landing gear configuration that applies:

☐ Tricycle ☒ Tailwheel
☐ Amphibian ☐ High Skid
☐ Emergency Float ☐ Skid
☐ Float ☐ Ski
☐ Hull ☐ Ski/Wheel
☐ Unknown

Type of Maintenance Program

☐ Annual
☒ Conditional (Amateur-built only)
☐ Manufacturer's Inspection Program
☐ Other Approved Inspection Program (AAIP)
☐ Continuous Airworthiness
☐ Other, specify: _____

Last Inspection Type

☐ 100 Hour ☐ Continuous Airworthiness
☐ AAIP ☒ Conditional Inspection
☐ Annual ☐ Unknown

Date Last Inspection: 6/14/2016

mm/dd/yyyy

Airframe Total Time: 129.3 hrs

hours measured at (check one)

☐ Last Inspection ☒ Time of Accident/Incident

IFR Equipped

☐ Yes ☒ No ☐ Unknown

Stall Warning System Installed

☒ Yes ☐ No ☐ Unknown

Type of Fire Extinguishing System

☒ None
☐ Specify _____

ELT Installed

☒ Yes ☐ No

ELT Activated

☐ Yes ☒ No

ELT Manufacturer: Kannad

Model/Series: 406 AF-Compact

ELT Aided in Locating Accident/Incident

☐ Yes ☒ No

Serial Number: 290029

Battery Type: 0141823E

Battery Exp. Date: 02/2018

Engine Type

☒ Reciprocating ☐ Turbo Jet
☐ Turbo Shaft ☐ Turbo Fan
☐ Turbo Prop ☐ Unknown

Reciprocating Fuel System Type

☐ Carburetor
☒ Fuel Injected

Propeller

☒ Fixed Pitch
☐ Controllable Pitch

Manufacturer: Warp Drive

Model: HP

Engine	Engine Manufacturer	Engine Model/Series	Manufacturer's Serial Number	Date of Mfg. <i>mm/dd/yyyy</i>	Engine Rated Power Measured as (check one) ☒ Horsepower or ☐ lbs of Thrust	Total Time (hours)	Time Since Inspection (hours)	Time Since Overhaul (hours)
Eng. 1	Louis W. Ott	3250	MV T0228ZP	6/14/2017	125	32.7	32.7	32.7
Eng. 2								
Eng. 3								
Eng. 4								

OWNER/OPERATOR INFORMATION		
Registered Aircraft Owner Name: <u>Louis W. Ott</u> Fractional Ownership Aircraft: ☐ Yes ☒ No		Owner Address City: <u>Mosier</u> State: <u>OR</u> ZIP: <u>97040</u> Country: <u>USA</u>
Operator of Aircraft ☒ Same As Registered Owner Name: _____ Doing Business As: _____ Air Carrier/Operator Designator (4 Character Code): _____		Operator Address ☒ Same As Registered Owner City: _____ State: _____ ZIP: _____ Country: _____
Regulation Flight Conducted Under ☒ FAR 91 ☐ FAR 129 ☐ FAR 91 Special Flight ☐ FAR 103 ☐ FAR 133 ☐ Non-US, Commercial ☐ FAR 121 ☐ FAR 135 ☐ Non-US, Non-commercial ☐ FAR 125 ☐ FAR 137 ☐ Armed Forces ☐ Public Use (select type) ☐ Federal ☐ State ☐ Local ☐ Unknown		Revenue Sightseeing Flight ☐ Yes ☒ No Air Medical Flight ☐ Yes ☒ No
Purpose of Flight for FAR 91, 103, 133, 137 (Select one) ☒ Personal ☐ Business ☐ Executive/Corporate ☐ Other Work Use ☐ Instructional ☐ Ferry ☐ Positioning ☐ Aerial Application ☐ Aerial Observation ☐ Air Drop ☐ Air Race / Show ☐ Flight Test ☐ Public Use ☐ Unknown	Revenue Operation for FAR 121, 125, 129, 135 (Select one) ☐ Scheduled or Commuter ☐ Non-Scheduled or Air Taxi Domestic or International ☒ Domestic ☐ International Cargo Operation ☐ Passenger/Cargo ☐ Passenger _____ How many? ☐ Cargo _____ lbs ☐ Mail	Type of Commercial Operating Certificate Held (Check all that apply) ☒ None ☐ Flag Carrier Operating Certificate (121) ☐ Supplemental ☐ Air Cargo ☐ Foreign Air Carriers (129) ☐ Commuter Air Carrier (135) ☐ On-Demand Air Taxi (135) ☐ Large Helicopter (127) ☐ Rotorcraft External Load (133) - or - ☐ Agricultural Aircraft (137) ☐ Other Operator of Large Aircraft
OTHER AIRCRAFT – COLLISION (If air or ground collision occurred, complete this section for <i>other</i> aircraft)		
Aircraft Registration Number _____	Manufacturer: _____ Model: _____	Damage to Other Aircraft ☐ Destroyed ☐ Minor ☐ Substantial ☐ None
Registered Owner of Other Aircraft First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____		
Pilot of Other Aircraft First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____		
MECHANICAL MALFUNCTION/FAILURE (If more space is needed, continue on separate sheet)		
Was there Mechanical Malfunction/Failure? ☒ Yes ☐ No ☐ Unknown <i>(If yes, list the name of the part, manufacturer, part no., serial no., and describe the failure.)</i> <u>Bolts (6) connecting the drive hub on the crankshaft to the propeller hub broke. That caused the prop hub to slip in relation to the crankshaft. The ignition timing reference ring is attached to the prop hub. When the prop hub slipped that caused the ignition timing to become retarded about 15+ degrees with attendant loss of engine power.</u>		Total Time/Cycles On Part <u>32.7</u> Hours _____ Cycles Time Since This Part Inspected/Overhauled <u>32.7</u> Hours _____
DAMAGE TO AIRCRAFT AND OTHER PROPERTY		
Aircraft Damage ☐ None ☐ Substantial ☐ Minor ☒ Destroyed	Aircraft Fire ☒ None ☐ Both Ground and In-Flight ☐ In-Flight ☐ Unknown Origin ☐ On-Ground	Aircraft Explosion ☒ None ☐ Both Ground and In-Flight ☐ In-Flight ☐ Unknown Origin ☐ On-Ground

Description of Damage to Aircraft and Other Property (use additional sheet if necessary)

Landing gear separated from fuselage. Underside of fuselage aft of the firewall badly damaged for about 10 feet. Underside of both wings badly damaged. Leading edge of wings damaged by contact with large rocks. Left wing fuel tank (located in leading edge) collapsed/ruptured by contact with large rock. Left wing spar slightly bent back. Fuselage canopy twisted and broken. Tail section ok. No damage to the earth.

AIRPORT INFORMATION (If the accident/incident occurred on approach, takeoff or within 3 miles of an airport, complete this section)Airport Identifier: KDLSDistance From Airport Center: Approx 1 SMAirport Name: Columbia Gorge Regional AirportDirection From Airport: 130 degrees MAGProximity to Airport ☒ Off Airport/Airstrip ☐ On Airport ☐ On AirstripAirport Elevation: 247 ft. MSL**Approach Segment** (Select one)

☐ On Instrument Approach ☒ Landing ☐ Base leg ☒ Final ☐ Go Around
☐ Crosswind ☐ Downwind ☐ Low Approach ☐ Aborted Landing (after touchdown)

IFR Approach (Check all that apply)

☐ None ☐ PAR ☐ MLS ☐ Practice
☐ ADF/NDB ☐ Sidestep ☐ LDA ☐ GPS
☐ SDF ☐ ILS ☐ ASR ☐ Loran
☐ VOR/TVOR ☐ Localizer Only ☐ Visual ☐ Unknown
☐ VOR/DME ☐ LOC-back course ☐ Contact
☐ TACAN ☐ RNAV ☐ Circling

VFR Approach (Check all that apply)

☐ None ☐ Stop and Go
☒ Traffic Pattern ☐ Touch and Go
☐ Straight-In ☐ Simulated Forced Landing
☐ Valley/Terrain Following ☒ Forced Landing
☐ Go Around ☐ Precautionary Landing
☐ Full Stop ☐ Unknown

Runway InformationRunway ID: 31 (L/R/C) Length: 5100 ft Width: 100 ft**Runway/Landing Surface** (Check all that apply)

☒ Asphalt ☐ Grass/Turf ☐ Macadam ☐ Water
☐ Concrete ☐ Gravel ☐ Metal/Wood ☐ Unknown
☐ Dirt ☐ Ice ☐ Snow

Condition of Runway/Landing Surface (Check all that apply)

☒ Dry ☐ Snow-Compacted ☐ Water-Calm
☐ Holes ☐ Snow-Crusted ☐ Water-Choppy
☐ Ice Covered ☐ Snow-Dry ☐ Water-Glassy
☒ Rough ☐ Snow-Wet ☐ Wet
☐ Rubber Deposits ☐ Soft ☐ Unknown
☐ Slush Covered ☒ Vegetation

FLIGHT ITINERARY INFORMATION**Last Departure Point**Airport ID: KDLSCity: The DallesState: ORCountry: USA**Time of Departure**Time: 5 pmTime Zone: Pacific**Destination**Airport ID: KDLSCity: The DallesState: ORCountry: USA**Type Flight Plan Filed**

☒ None ☐ VFR/IFR
☐ Company VFR ☐ IFR
☐ Military VFR ☐ Unknown
☐ VFR

Activated? ☐ Yes ☐ No**Type of ATC Clearance/Service** (Check all that apply)

☒ None ☐ Special VFR ☐ Special IFR ☐ VFR Flight Following ☐ Cruise
☐ VFR ☐ IFR ☐ VFR On Top ☐ Traffic Advisory ☐ Unknown / NA

Airspace where the accident/incident occurred (Check all that apply)

☐ Class A ☒ Class E ☐ Prohibited Area ☐ Jet Training Area ☐ Special
☐ Class B ☐ Class G ☐ Restricted Area ☐ TRSA ☐ Air Traffic Control Area
☐ Class C ☐ Demo Area ☐ Military Operations Area (MOA) ☐ FAR 93 ☐ Unknown
☐ Class D ☐ Warning Area ☐ Airport Advisory Area

Aircraft Load Description (Check all that apply)

☐ None ☐ Towing Glider ☐ Parachutists ☐ Livestock
☒ Passengers ☐ Towing Banner ☐ Water ☐ Unknown
☐ Cargo ☐ Other External ☐ Chemical/Fertilizer/Seeds

FUEL & SERVICES INFORMATION**Fuel on Board at Last Takeoff**

(convert from pounds, as necessary)

15 Gallons**Fuel Type**

☐ 80/87 ☐ 115/145 ☐ JP3 ☐ Other, specify _____
☒ 100 Low Lead ☐ Jet A ☐ JP4
☐ 100/130 ☐ Automotive ☐ JP5

Other Services, if Any, Prior to Departure

EVACUATION OF AIRCRAFTWas an emergency evacuation of the aircraft performed? ☒ Yes ☐ No**Method of Exit** – Describe how the occupants exited and how many occupants evacuated each location

Opened bent canopy and exited aircraft normally. Pilot needed some help.

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE**Weather Observation Facility**Facility ID: KDLSObservation Time: 5 pmTime Zone: PacificDistance from Accident Site: 1 NMDirection from Accident Site: 340 degrees MAG**Source of Weather Information**

(Check all that apply)

☐ National Weather Service☐ Flight Service Station☐ TV/Radio☒ Automated Report☐ Commercial Weather Service (DUATS)☐ Company☐ Military☐ Internet☐ Unknown**Method of Briefing**

(Check all that apply)

☐ In Person☐ Teletype☐ Telephone/Computer☒ Aircraft Radio☐ TV/Radio☐ Unknown**Briefing Type/Completeness**☐ Full☐ Partial / Limited By Pilot☐ Partial / Limited By Briefer☐ Abbreviated☐ Unknown☒ Not Pertinent**Light Condition**☐ Dawn☒ Day☐ Dusk☐ Night☐ Dark Night☐ Bright Night☐ Not Reported**Visibility**10+ miles**Sky/Lowest Cloud Condition**☒ Clear☐ Few☐ Partial Obscuration☐ Scattered☐ Thin Broken☐ Thin Overcast☐ Unknown**Ceiling**☒ None (clear)☐ Broken☐ Overcast☐ Obscured☐ Indefinite☐ Unknown**Restriction to Visibility (Check all that apply)**☒ None☐ Blowing Dust☐ Blowing Sand☐ Blowing Snow☐ Blowing Spray☐ Dust☐ Fog☐ Ground Fog☐ Haze☐ Ice Fog☐ Smoke☐ Unknown**Lowest Cloud Condition Height** ft AGL**Ceiling Height** ft AGL**Wind Direction**☒ Indicated:
300 degrees MAG☐ Variable**Wind Speed**Velocity: 10 KTS

-or-

☐ Calm☐ Light and Variable**Wind Gusts**Velocity: KTS☐ Gusting☒ Not Gusting**Type of Turbulence (Check all that apply)**☒ None☐ Clear Air☐ In Clouds☐ Vicinity of Thunderstorm**Severity of Turbulence**☐ Extreme☐ Severe☐ Moderate☐ Moderate Chop☐ Light**NOTAMs (D, L and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident**

None

Temperature: (C)
or 60 (F)Altimeter Setting: in. HG
or MBDensity Altitude: ftDew Point: (C)
or (F)**Icing Forecast****Amount**☒ None☐ Trace☐ Light☐ Moderate☐ Severe**Type**☐ Rime☐ Clear☐ Mixed**Icing Actual****Amount**☒ None☐ Trace☐ Light☐ Moderate☐ Severe**Type**☐ Rime☐ Clear☐ Mixed**Type of Precipitation (Check all that apply)**☒ None☐ Rain☐ Snow☐ Hail☐ Rain Showers☐ Freezing Rain☐ Snow Shower☐ Drizzle☐ Ice Pellets☐ Snow Pellets☐ Snow Grains☐ Ice Crystals☐ Ice Pellets Shower☐ Freezing Drizzle**Intensity of Precipitation**☐ Light☐ Moderate☐ Heavy

PILOT "A" INFORMATION

Pilot "A" Responsibilities at the Time of Accident/Incident

☒ Pilot
 ☐ Co-Pilot
 ☐ Student Pilot
 ☐ Flight Instructor
 ☐ Check Pilot
 ☐ Flight Engineer
 ☐ Other Flight Crew

Pilot "A" Identification

First Name: Louis City: Mosier
 Middle Initial: W State: OR ZIP: 97040
 Last Name: Ott Country: USA
 Age at time of Accident/Incident: 76 Date of Birth: mm/dd/yyyy 40 Certificate Number: mm/dd/yyyy +

Degree of Injury

☐ None
 ☐ Fatal
☒ Minor
 ☐ Unknown
☐ Serious

Seat Occupied

☒ Left
 ☐ Front
 ☐ Unknown
☐ Right
 ☐ Rear
☐ Center
 ☐ Single

Seat Belt

Used ☒ Yes ☐ No
 Available ☐ Yes ☐ No

Shoulder Harness

Used ☒ Yes ☐ No
 Available ☐ Yes ☐ No

Pilot Certificate(s) (Check all that apply)

☐ None
 ☐ Student
 ☐ Recreational
 ☒ Commercial
 ☐ Flight Engineer
 ☐ Foreign
☐ Private
 ☐ Flight Instructor
 ☐ Sport
 ☐ Airline Transport
 ☐ U.S. Military

Principal Occupation

☒ Pilot
☐ Other
☐ Unknown

Medical Certificate

☒ None
 ☐ Class 3
☐ Class 1
 ☐ Driver's License (Sport Pilot only)
☐ Class 2
 ☐ Unknown

Medical Certificate Validity

☐ Without limitations/waivers
☐ With limitations/waivers
☐ Unknown

Date of Last Medical

mm/dd/yyyy

Medical Certificate Limitations

Medical Certificate Waivers

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:

9/28/2016
 mm/dd/yyyy

Flight Review Aircraft

Make: VAN
 Model: RV-12

Airplane Rating(s) (Check all that apply)

☐ None
☒ Single-Engine Land
☐ Single-Engine Sea
☐ Multiengine Land
☐ Multiengine Sea

Other Aircraft Rating(s) (Check all that apply)

☒ None
☐ Airship
☐ Free Balloon
☐ Glider
☐ Gyroplane
☐ Helicopter
☐ Powered Lift

Instrument Rating(s) (Check all that apply)

☒ None
☐ Airplane
☐ Helicopter
☐ Powered Lift

Instructor Rating(s) (Check all that apply)

☒ None
 ☐ Instrument Airplane
☐ Airplane Single-Engine
 ☐ Instrument Helicopter
☐ Airplane Multi-Engine
 ☐ Helicopter
☐ Gyroplane
 ☐ Glider
☐ Powered Lift
 ☐ Sport

Type Ratings

Student Endorsements (Include dates)

Flight Time (enter appropriate number of hours in each box)	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air
						Actual	Simulated			
Total Time	1661.1	129	1661.1		23.9		10.5			
Pilot in Command (PIC)	1600	129	1600							
Time as Instructor										
This Make/Model										
Last 90 Days		20								
Last 30 Days		5								
Last 24 Hours		0.5								

PILOT "B" INFORMATION

Pilot "B" Responsibilities at the Time of Accident/Incident

☐ Pilot
 ☐ Co-Pilot
 ☐ Student Pilot
 ☐ Flight Instructor
 ☐ Check Pilot
 ☐ Flight Engineer
 ☐ Other Flight Crew

Pilot "B" Identification

First Name: _____ City: _____
 Middle Initial: _____ State: _____ ZIP: _____
 Last Name: _____ Country: _____
 Age at time of Accident/Incident: _____ Date of Birth: _____ Certificate Number: _____
mm/dd/yyyy

Degree of Injury

☐ None
 ☐ Fatal
☐ Minor
 ☐ Unknown
☐ Serious

Seat Occupied

☐ Left
 ☐ Front
 ☐ Unknown
☐ Right
 ☐ Rear
☐ Center
 ☐ Single

Seat Belt

Used ☐ Yes ☐ No
 Available ☐ Yes ☐ No

Shoulder Harness

Used ☐ Yes ☐ No
 Available ☐ Yes ☐ No

Pilot Certificate(s) (Check all that apply)

☐ None
 ☐ Student
 ☐ Recreational
 ☐ Commercial
 ☐ Flight Engineer
 ☐ Foreign
☐ Private
 ☐ Flight Instructor
 ☐ Sport
 ☐ Airline Transport
 ☐ U.S. Military

Principal Occupation

☐ Pilot
☐ Other
☐ Unknown

Medical Certificate

☐ None
 ☐ Class 3
☐ Class 1
 ☐ Driver's License (Sport Pilot only)
☐ Class 2
 ☐ Unknown

Medical Certificate Validity

☐ Without limitations/waivers
☐ With limitations/waivers
☐ Unknown

Date of Last Medical

_____ mm/dd/yyyy

Medical Certificate Limitations

Medical Certificate Waivers

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:

_____ mm/dd/yyyy

Flight Review Aircraft

Make: _____

Model: _____

Airplane Rating(s)

(Check all that apply)
☐ None
☐ Single-Engine Land
☐ Single-Engine Sea
☐ Multiengine Land
☐ Multiengine Sea

Other Aircraft Rating(s)

(Check all that apply)
☐ None
☐ Airship
☐ Free Balloon
☐ Glider
☐ Gyroplane
☐ Helicopter
☐ Powered Lift

Instrument Rating(s)

(Check all that apply)
☐ None
☐ Airplane
☐ Helicopter
☐ Powered Lift

Instructor Rating(s)

(Check all that apply)
☐ None
 ☐ Instrument Airplane
☐ Airplane Single-Engine
 ☐ Instrument Helicopter
☐ Airplane Multi-Engine
 ☐ Helicopter
☐ Gyroplane
 ☐ Glider
☐ Powered Lift
 ☐ Sport

Type Ratings

Student Endorsements (Include dates)

Flight Time (enter appropriate number of hours in each box)	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air
						Actual	Simulated			
Total Time										
Pilot in Command (PIC)										
Time as Instructor										
This Make/Model										
Last 90 Days										
Last 30 Days										
Last 24 Hours										

ADDITIONAL FLIGHT CREW MEMBERS (Exclusive of cabin attendants, complete the following information)																	
Pilot Name and Address						Degree of Injury											
First Name: _____		City: _____				☐ None		☐ Fatal									
Middle Initial: _____		State: _____		ZIP: _____		☐ Minor		☐ Unknown									
Last Name: _____		Country: _____				☐ Serious											
Pilot Certificate(s) (Check all that apply)						Seat Occupied											
☐ None		☐ Student		☐ Recreational		☐ Commercial		☐ Flight Engineer									
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military									
								☐ Foreign									
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No				Total Flight Time at the Time of this Accident/Incident: _____ hrs		☐ Left		☐ Front									
						☐ Right		☐ Rear									
						☐ Center		☐ Single									
								☐ Unknown									
Pilot Name and Address						Degree of Injury											
First Name: _____		City: _____				☐ None		☐ Fatal									
Middle Initial: _____		State: _____		ZIP: _____		☐ Minor		☐ Unknown									
Last Name: _____		Country: _____				☐ Serious											
Pilot Certificate(s) (Check all that apply)						Seat Occupied											
☐ None		☐ Student		☐ Recreational		☐ Commercial		☐ Flight Engineer									
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military									
								☐ Foreign									
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No				Total Flight Time at the Time of this Accident/Incident: _____ hrs		☐ Left		☐ Front									
						☐ Right		☐ Rear									
						☐ Center		☐ Single									
								☐ Unknown									
Pilot Name and Address						Degree of Injury											
First Name: _____		City: _____				☐ None		☐ Fatal									
Middle Initial: _____		State: _____		ZIP: _____		☐ Minor		☐ Unknown									
Last Name: _____		Country: _____				☐ Serious											
Pilot Certificate(s) (Check all that apply)						Seat Occupied											
☐ None		☐ Student		☐ Recreational		☐ Commercial		☐ Flight Engineer									
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military									
								☐ Foreign									
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No				Total Flight Time at the Time of this Accident/Incident: _____ hrs		☐ Left		☐ Front									
						☐ Right		☐ Rear									
						☐ Center		☐ Single									
								☐ Unknown									
PASSENGER(S) / OTHER PERSONNEL (Include flight attendants; continue on separate sheet if necessary)																	
Name and Address						Seat	Crew	Non-Revenue	Revenue	Non-Occupant	FAA	Fatal	Serious Injury	Minor Injury	No Injury	Unknown	
First Name: <u>Christine</u>						R	✓	□	□	□	□	□	□	□	□	✓	□
Middle Initial: <u>G</u>																	
Last Name: <u>Off</u>																	
City: <u>Mosier</u>						□	□	□	□	□	□	□	□	□	□	□	
State: <u>OR</u>																	
ZIP: <u>97040</u>																	
Country: <u>USA</u>						□	□	□	□	□	□	□	□	□	□	□	
City: _____																	
State: _____ ZIP: _____																	
Country: _____						□	□	□	□	□	□	□	□	□	□	□	
City: _____																	
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Country: _____						□	□	□	□	□	□	□	□	□	□	□	
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Country: _____						□	□	□	□	□	□	□	□	□	□	□	
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State: _____ ZIP: _____																	
Country: _____						□	□	□	□	□	□	□	□	□	□	□	
City: _____																	
State: _____ ZIP: _____																	
Country: _____						□	□	□	□	□	□	□	□	□	□	□	
City: _____																	
State: _____ ZIP: _____																	
Country: _____						□	□	□	□	□	□	□	□	□	□	□	
City: _____																	
State: _____ ZIP: _____																	
Country: _____						□	□	□	□	□	□	□	□	□	□	□	
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NARRATIVE HISTORY OF FLIGHT (Please type or print in ink)

Describe what occurred in chronological order, including circumstances leading to and nature of accident/incident. Describe terrain and include wreckage distribution sketch if pertinent. Attach extra sheets if needed. State time and point of departure, intended destination, and services obtained.

Reference attached file, Dynon data2.jpg, showing flight time, altitude, EGT, CHT, RPM. Data was retrieved from the installed Dynon Syview system. The local flight was for mainly pleasure on a nice evening. All indications prior to takeoff were normal, engine runup, check of alternate ignition and fuel injection systems as well as fuel pumps were normal.

Takeoff was at about 5pm from runway 31 at KDLS. Wind was at 300 at 10kts as reported by local ASOS. At 5 min, 7 seconds into the flight at 3500 ft MSL, the RPM suddenly dropped about 400 RPM and the EGTs rose from about 1250F to near 1600F. The sound of the engine changed although it kept running and was making power. I turned back toward the airport from about 3 miles East of KDLS. I tried everything I could think of to find out why I had power reduction. I tried different fuel tank, alternate ignition control unit, alternate fuel injection unit. All engine gauges except EGT showed normal and nothing helped. I reduced power to lower EGT. The high EGT had me concerned. At about 8min, 30 sec, I was over the airport at about 1800 ft MSL. Pattern altitude is 1100 ft MSL and since I had some power, I determined I should be able to fly a slightly tight pattern and land on runway 31 which was the in-use runway. On downwind at 10 min into the flight I tested power and saw I had enough to make about 2100RPM which should have been sufficient to continue the tight pattern to landing. As I turned to final (into the wind) my groundspeed slowed and I got into the downslope wind off the end of the runway. I started sinking and couldn't arrest the sink with power. See the small increase in RPM which just wasn't enough. I raised the nose prior to landing short of the runway and probably 100 ft short of the overrun area. The AOA warning sounded just as I hit. Flight ended at about 10 min, 35 sec. In retrospect, the prop hub/timing reference likely slipped more at my last power check on downwind and further retarded ignition timing and reduced power more. The place I landed was aligned with the runway but on a rather steep rise in grass and large boulders. The aircraft didn't travel more than about 3 to 6 ft forward travelling about 38 mph (into the wind). A quick stop.

RECOMMENDATION (How could this accident/incident have been prevented?)

Operator/Owner Safety Recommendation

I could have went to near panic mode and got it on the ground as soon as possible instead of analyzing the situation and determining that I should have enough power to make a near normal pattern and landing. That didn't work.

The 6 bolts that broke may not have been torqued tight enough and allowed the prop hub to work radially around the crankshaft causing the bolts to fracture over time. I thought I had them torqued properly, but it is really unknown. I'd recommend that the prop hub bolts be checked for tightness at no more than 5 hrs after initial startup of the engine. Before first flight after initial ground running is completed. The bolt torque should be checked again after 10 hrs, and 20 hrs. Check again at each annual condition inspection.

Alternatively, use a Corvair auto to aircraft conversion that doesn't use this particular method of driving the propeller. One other conversion uses a steel prop hub and front crankshaft piece that is securely pressed on to the Corvair style crankshaft snout. It is very secure and uses a thrust bearing right behind the prop hub supported in a robust aluminum housing bolted to the front of the crank case. That is my curent choice when I rebuild this engine.

ADDITIONAL INFORMATION *(Please type or print in ink)*

Use this space if additional space is needed for any answers.

I can't think of anything else to add. Senseless waste of a good little airplane.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Date of this ReportJuly 29, 2017*mm/dd/yyyy***Signature and Name of Pilot/Operator**

Signature: _____

Type or Print Name: Louis W. Ott**Signature and Name of Person Filing Report if Other than Pilot/Operator**

Signature: _____

Type or Print Name: _____

Title: _____

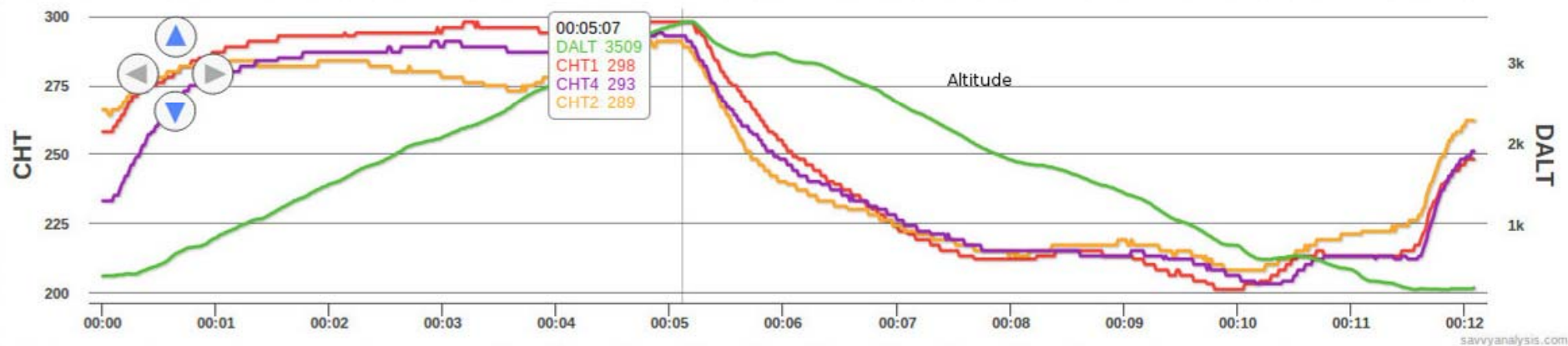
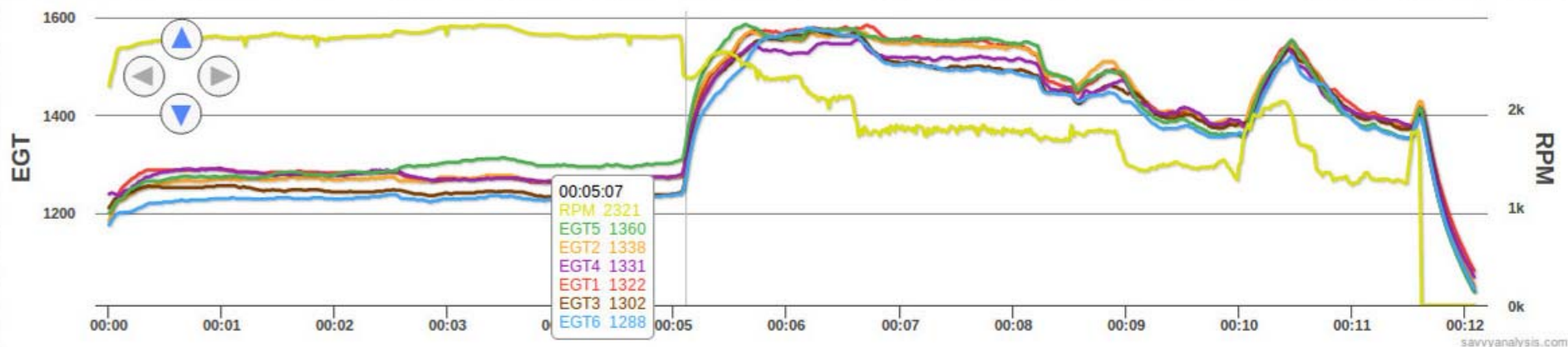
FOR NTSB USE ONLY**NTSB Accident/Incident No.**WPR17LA082**Reviewed by NTSB Regional Office**WPR**Name of Investigator**LINK**Date Report Received**8/3/2017

Want us to analyze this flight for you? [Upgrade to SavvyAnalysis Pro...](#)

EGT

All Odd Even EGT1 EGT2 EGT3 EGT4 EGT5 EGT6 RPM

RPM



CHT

All Odd Even CHT1 CHT2 CHT3 CHT4 CHT5 CHT6 DALT

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