

	WATER I	RESOURCES BRANGATER WELL
Well ID:	1	DRILLERS FORM
	To be assigned by Dept. Of Environment	Metric O Imperial

INSTRUCTIONS FOR COMPLETING THE FORM

- 1. Additional information is provided at the bottom of this form on page 2.

- Please print clearly in blue or black ink.
 Completion and submission of this form is the responsibility of

3. All well construction measurements shall be reported to 0.1 m or 0.3 ft. 6. Please specify metric or imperial units for all measurements.	
WELL LOCATION AND OWNER'S INFORMATION A1 Well Name: Optional (i.e. City Well No. 2)	
First Name Last Name Company / Department / Organization	
A2 Drilled For: Yukan College	
A3 Street Address of Well Location: Sketch of Well Location In sketch, indicate distances from property line,	
A4 Town / Village / Area / Lot #: septic field, fuel tank(s) and building. Please include North arrow.	
A5 UTM Coordinates (using handheld GPS): NAD 8 3 Zone	
Easting Northing	
A6 Elevation of Top of Casing: m / ft ASL	
A7 Accuracy of GPS: +/- m / ft	
A8 Purpose of Wells	
☐ Domestic ☐ Test Well ☐ Irrigation ☐ Environmental (Quality)	
☐ Commercial ☐ Municipal ☐ Observation - Water Level ☐ Other (please identify use)	
☐ Industrial ☐ Agricultural ☐ Public/Recreational	
LOG OF OVERBURDEN AND BEDROCK MATERIALS (All depths are below ground surface, circle appropriate units, use descriptors provided)	
"trace" < 10% (i.e. SILT trace gravel) "some" 10-20% (i.e. SAND some gravel)	
EXAMPLE (brown, grey, green, black, redish, beige, olive, yellowish) COBBLES, BOULDERS, BEDROCK "silty / sandy / gravely" 20-30% (i.e. silty SAND) "silty / sandy / gravely" 25-30% (i.e. silty SAND) MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard	
brown SAND trace gravel some silt soft and saturated	
Depth (m / ft) B4 General Colour B5 Most Common Material B6 Secondary Materials B7 General Description	
a la brown Grand Sand Med-Rine	
12 6 brown Sand Grand Mid-Ring	
16 54 Drown Grave Sand Coars Ghalf	
129 128 1200 1200 1200 1200 1200 1200 1200	
Sale Drew Corally Sarc Coarse Saic	4 136
187 168 Care Care	1
150 16 Draws Charles Cut San	ĺ
165 178 Whown Grand Little Sand Looke Consulting	Chaul
The state of the s	Grawi
B8 Permafrost Encountered: NO YES If yes, indicated depth (m / ft): from: to:	
WELL CONSTRUCTION (Continues on Page 2) Date Well Completed Date Well Completed Date Well Completed Date Well Da	
Y Y Y M M D D C1 Drilling Method ☑ Air Rotary (Conventional) ☐ Dug ☐ Other (please specify) C2 Well Type: In what geological material is the	
Reverse Air Rotary Cable Tool	
☐ Mud Rotary ☐ Auger (Hollow / Solid Stem) ☐ OVERBURDEN ☐ BEDROCK	
Casing (depth below ground surface, please circle appropriate units) C7 Other Comments Regarding Casing:	
C3 Outside C4 Casing Material C5 Casing Wall Thickness C6 Casing Depth to: Diameter Cm (in) Steel C5 Casing Wall Thickness C6 Casing Depth to:	
Plastic Other	

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Surface / Environmental Seal (depth below ground surface, please circle Seal Material Type: C9 Diameter of Seal: (i.e. Bentonite) C9 Diameter of C10 Seal: C10 Se	al Depth from:	C11 Seal Depth	i to: (m / ft)			: (m³/t³) tlors
Gravel Pack (depth below ground surface, please circle appropriate units)						
C13 Gravel Pack: ☑ NO If yes, indicated depth (m / ft): ☐ YES from: ☐ to: ☐ Indicate diagram of the control	ameter of material:	(mm / inches		al type: [
Well Screen Information (depth below ground surface, please circle app	propriate units) C17 De	pth from: C1	8 Depth to	o: ;	Slot Size / Pe	rforation Dia:
C14 Outside Diameter C15 Screen Material C16 Screen Type Continuous Wire V Con	Screen 1. 170 Wrap Screen 2. Screen 3. C19 Screen Comments:	(m/ft) (m/ft) (m/ft) (m/ft) (m/ft)	166] (m/f(Y)]] (m/ft)] (m/ft)	Tho	u./mm/inches u./mm/inches u./mm/inches
WELL DEVELOPMENT AND STATUS						
☐ Surge Block ☐ Well House (above ☐ Water Jetting ☐ Pitless Adaptor Depth of adaptor: ☐	ge ground surface) (mylti) se negative if below grade) D7 We	(Use negative if the	n) (m/ft) pelow grade, Status	, D	l Yield Estima シック (Lp 8 Method Use Estimate W	ed to
☐ Stand by (Back-up) ☐ Deepened If well was ☐ Observation ☐ Other: ☐ give reason:	Dry Witl Poor Quality If Y Insufficient Yield Artesian conditions	is the well properly h bentonite grout? 'ES, Indicate Date Y Y Y Y N	YES	D	☐ Air Liftir☐ Bailing☐ Pumpin (If test con	•
PUMPING TEST RECORD AND GROUNDWATER QUALIT	TY	F1 Well Water L				
(All depths below ground, circle appropriate units) E1 Pumping Test Information		Drawdowi Time Wa	n ter Level	Reco Time	very <i>Water Level</i>	
Pumping Test Start Date: RECOMMENDATIONS			m/ft)	(min)	(m / ft)	
Recomm. Pump Depth:	f+ \	0 (SWL)		0 (FWL)		
Y Y Y M M D D	,	2		2		
Static Water Level (SWL): Recomm. Pumping Rate:		3		3		
	s / gpm)	4		4		
Pump Intake Set at: If flowing, provide rate:		5		5		
(m/ft) (Lps	s / gpm)	10		10		
Duration of pumping:		15		15		
hrs min		20		20		
Final Water Level (FWL) at end of Pumping Test:		25		25		
(m/ft)		30		30		
G1 GROUNDWATER QUALITY		40	-	40		
Field Data Turbidity/Sand Content		50		50		
Date Measurements Taken:		60		60		
☐ Slightly turbid/cloudy	Ba	acteria Testing				
Y Y Y M M D D Moderately turbid/cloud		Was a sample tak	en? 🗌 Yl	ES 🗌 NO) If yes, inc	dicate the
Electrical Conductivity: uS		Date Sample Take	en:		name of the	laboratory.
pH: Trace sand present						
Temperature: C No sand present	C	Y Y Y Y		D D		
Groundwater Type Well Disinfection		nemical Analysis Was a sample tak		в Пис) If we inc	licate the
☐ Salty Was the well disinfected upon of	1-4:	Date Sample Take			name of the	
☐ Sulphur / Egg Odour was the well distributed upon of the pump installation? ☐ YE	ES 🗌 NO					
☐ Organic Taste / Odour Briefly describe method of well		YYYY	м м	D D		
☐ Metallic Taste						
Other:						
WELL CONTRACTOR		CONSULTANT (#	f applicable	:)		
H1 Name of Contractor / Drilling Company: M A 4 1 1 1 5 14		I 1 Company Nam	J	,		
H2 Name of Driller(s): Cah Mack-212	<u> </u>	I 2 Company Addi				
H3 Address of Driller: 806 Black St. Whit		l 3 Report Referer	7			
	M M D D	I 4 Report Date:	Y	YY	Y M M D	D
Date Submitted to Dept. Of Environment ADDITIONAL INSTRUCTIONS Personal information contained on this form is collected under the authority of the Access to						
Upon completing this form, please mail or fax it to: Water Resources Section (V-310), Department of Environment, please mail or fax it to: Information and Protection of Privacy (ATIPP) Act, Section 29 (c) and will be used to compile a public database of well and ground water information. For further information contact the						
	•	na ground water into				
Government of Yukon Box 2703, Whitehorse, Yukon, Canada Y1A 2C6 Please feel free to contact us at:	Manager of Hydrology, W 1-800-661-0408 Ext 322	later Resources at (f	867) 667-32	23, toll free	within Yukon	