

Water Resources Section V-310 Yukon Water Well Registry Box 2703 Whitehorse, Yukon Y1A 2C6



Well ID: 204/005 To be assigned by Dept. Of Environment

Well Record Page 1 of 2 WATER WELL **DRILLERS FORM** 

105D10

Metric O Imperial O

| INSTRUCTIONS FOR COMPLETING THE FORM  1. Additional information is provided at the bottom of this form on page 2.  2. Question can be directed to Water Resources at 867 667-3171.  3. All well construction measurements shall be reported to 0.1 m or 0.3 ft.   | 4. Please print clearly in blue or black ink. 5. Completion and submission of this form is the responsibility of the drilling contractor. 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)   |  |  |  |  |  |  |  |
|   | Company / Department / Organization  |  |  |  |  |  |  |
| A2 Drilled For:   |  |  |  |  |  |  |  |
| A3 Street Address of Well Location: #112 Judas (NCK   | Sketch of Well Location In sketch, Indicate distances from property line,  |  |  |  |  |  |  |
| A4 Town / Village / Area / Lot #: Marsh La Ke   | septic field, fuel tank(s) and building. Please include North arrow.   |  |  |  |  |  |  |
| A5 UTM Coordinates (using handheld GPS): NAD 8   3   Zone 8   CAKE  |  |  |  |  |  |  |  |
| 541 405 6 699 911 Easting Northing  | House  |  |  |  |  |  |  |
| A6 Elevation of Top of Casing: m/ft ASL   | 30-(00 m   |  |  |  |  |  |  |
| A7 Accuracy of GPS: +/- m / ft  | WILL &   |  |  |  |  |  |  |
| A8 Purpose of Wells   | ROAD   |  |  |  |  |  |  |
| 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 be  | elow ground surface, circle appropriate units, use descriptors provided)   |  |  |  |  |  |  |
| **  | "traca" <10% (i.e. SILT trace gravel)<br>prie" 10-20% (i.e. SAND some gravel)  |  |  |  |  |  |  |
| EXAMPLE (brown, grey, green, black, CLAY, SILT, SAND, GRAVEL, "silty /  | sandy / gravely 20-30% (i.e. sitry SAND) MOISTURE: dry / moist / saturated (wet) "and sand" or "and gravel" 35-50% HARDNESS: soft / hard / very hard   |  |  |  |  |  |  |
| ONLY   redish, beige, alive, yellowish)  brown  SAND  | trace gravel some slit soft and saturated  |  |  |  |  |  |  |
| Depth (m/tt)/ B2 From B3 To B4 General Colour B5 Most Common Material   | B6 Secondary Materials B7 General Description  |  |  |  |  |  |  |
| 0 43 Brown SAND GRAVEL  | dry soft   |  |  |  |  |  |  |
| 43 47 Grey Clay   | some sand saturated soft   |  |  |  |  |  |  |
| 47 51 Grey cobbles  | some sand saturated hat  |  |  |  |  |  |  |
| 52 50 Grey SAVD   | Some Gravel Saturated Seft   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| <del></del>   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| B8 Permafrost Encountered: PNO VES If yes, indicated depth ( m / ft ): from: to:  |  |  |  |  |  |  |  |
| WELL CONSTRUCTION (Continues on Page 2)  Date Well Completed  Date Well |  |  |  |  |  |  |  |
| C1 Drilling Method Air Rotary (Conventional) Dug  | Other (please specify)  C2 Well Type: In what geological material is the water producing zone located?   |  |  |  |  |  |  |
| ☐ Reverse Air Rotary ☐ Cable Tool ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐   |  |  |  |  |  |  |  |
| Mud Rotary  |  |  |  |  |  |  |  |
| Casing (depth below ground surface, please circle appropriate units)  | C7 Other Comments Regarding Casing:  |  |  |  |  |  |  |

YG(5302)F2 Rev. 09/2006

Clear Form

**Print Form** 

| Surface / Environmental Se  C8 Seal Material Type:  (i.e. Bentonite)   |  | circle appropriate units)  pal Depth from: ( m (fr)                    | C11 Seal Depth t   | o: C12 V                           | 12-1                        | :<br>(m³/ft³)           |
|--|--|--|--|------------------------------------|-----------------------------|-------------------------|
|  |  | .1/4   |  |                                    |                             |                         |
| Gravel Pack (depth below ground s<br>C13 Gravel Pack: ☐ NO If ye   |  | NA   |  |                                    |                             |                         |
| C13 Gravel Pack: NO If yes from  | es, indicated depth ( m / ft ): m: to: Indicate c  | diameter of material:  | ( mm / inches )  | Material type:<br>(i.e. silica)    |                             |                         |
| Well Screen Information (dep   | oth below ground surface, please circle ap   | propriate units)   |  | Depth to:                          | Slot Size / Per             | 3                       |
| C14 Outside C15 Screen Ma Diameter (cm / in) Stainles Steel Plastic Plastic N/A Other  | ss Steel Continuous Wire Louver Screen   | Screen 2   | (m/ft) (m/ft)  | (m/ft)<br>(m/ft)                   | Tho                         | mm / inches             |
| WELL DEVELOPMENT AND   | STATUS   |  |  | +                                  | - 1                         |                         |
| D1 Well Developed by Surge Block Water Jetting Water Jetting Warer Jetti | Head Completion D3 Well<br>Vell House (above<br>itless Adaptor Depth of adaptor;   | re ground surface) (m(t) Ise negative if below grad                    | de) (Use negative if be<br>Well Abandonment S<br>Was the well properly                           | how grade)  Status  decommissioned | OB Method Use Estimate W    | s/gpm)  ad to ell Yield |
| D6 Final Well Status  ☐ Water Supply (in use) ☐ Not  | in use   | □ Dry  | with bentonite grout?  | ☐ YES                              | ☐ Bailing                   | •                       |
| Stand by (Back-up) Dec   | epened If well was   | Poor Quality   | If YES, Indicate Date:   |                                    | Pumpin                      | ducted, complete        |
| Observation Oth  | give reason:   | Insufficient Yield Antesian conditions                                 |  |                                    | Pumping To                  | est Record)             |
|  |  | a rational conditions  | YYYM   | M D D                              |                             |                         |
| PUMPING TEST RECORD A  | ND GROUNDWATER QUAL  | ПУ   | F1 Well Water Le   |                                    |                             |                         |
| (All depths below ground, circle appropriate   | e units)   |  | Drawdown<br>Time Wate  | Rec<br>r Level Time                | overy<br><i>Water Level</i> |                         |
| E1 Pumping Test Information Pumping Test Start Date:   | RECOMMENDATIONS  |  |  | /ft) (min)                         | (m /ft )                    |                         |
| Fullpling lest start bate.   | Recomm. Pump Depth:  |  | 0 (SWL)  | 0 (FWL)                            |                             |                         |
| YYYYMMDD   | ( m.   | /ft)   | 1  | 1                                  |                             |                         |
| Static Water Level (SWL):  | Recomm. Pumping Rate:  | :  | 2  | 2                                  |                             |                         |
| (m/ft)   | ( 4  | ns/gpm)  | 3  | 3                                  |                             |                         |
| Pump Intake Set at:  | W. C   |  | 4  | 4                                  |                             |                         |
| (m/ft)   | If flowing, provide rate:  | s/gpm)   | 5  | 5                                  |                             | (4)                     |
| Duration of pumping:   |  | 5, gp,   | 10   | 10                                 |                             |                         |
| hrs min  |  |  | 15   | 15                                 |                             |                         |
| Final Water Level (FWL)  |  |  | 20   | 20                                 |                             |                         |
| 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:   | ☐ Clear  |  | 60   | 60                                 | L                           |                         |
|  | Slightly turbid/cloudy   |  | <b>Bacteria Testing</b>  | D D                                | _                           |                         |
| YYYYMMDD   | Moderately turbid/clou   | idy  | Was a sample take  |                                    | O If yes, inc               | licate the              |
| Electrical Conductivity: uS  | ☐ Turbid/cloudy  |  | Date Sample Taker  | 1:                                 | TAINS OF THE                | ADDITION                |
| рН:  | Trace sand present   |  | Y Y Y Y  | M M D D                            | L                           |                         |
| Temperature: C   | ☐ No sand present  |  | Chemical Analysis  |                                    |                             |                         |
| Groundwater Type   | Well Disinfection  |  | Was a sample take  |                                    | O If yes, inc               | licate the              |
| ☐ Salty  | Was the well disinfected upon  | completion   | Date Sample Taken  | :                                  | name of the                 | laboratory.             |
| ☐ Sulphur / Egg Odour  | of the pump installation?  | /ES NO   |  |                                    | . 5.                        |                         |
| Organic Taste / Odour  | Briefly describe method of we  |  | YYYY   | M M D D                            |                             |                         |
| ■ Metallic Taste   |  |  | Clear For  | m Print F                          | orm                         |                         |
| Other:   |  |  | Clear For  | 111111                             | OIIII                       |                         |
| WELL CONTRACTOR  |  |  | CONSULTANT (If a   | applicable)                        |                             |                         |
| H1 Name of Contractor / Drilling Com   | pany: (Cothway 11)   | ater   | I 1 Company Name   |                                    |                             |                         |
| H2 Name of Driller(s):   | 500  |  | I 2 Company Addre  |                                    |                             |                         |
| H3 Address of Driller:   |  |  | I 3 Report Reference   |                                    |                             |                         |
|  |  |  | I 4 Report Date:   |                                    |                             |                         |
| Signature of Finnary Dimor   | Y Y Y Y  Date Submitted to I   | M M D D .  | 7%   | YYY                                | Y M M D                     | D D                     |
| ADDITIONAL INSTRUCTION   | IS   | Personal information   | contained on this form is  | collected under the a              | uthority of the Ac          | cess to                 |
| Upon completing this form, please mail or fax it to:   | Water Resources Section (V-310),<br>Department of Environment,<br>Government of Yukon Box 2703,<br>Whitehorse, Yukon, Canada Y1A 2C6 | public database of we<br>Manager of Hydrology                          | oction of Privacy (ATIPP) of<br>the land ground water inforty,<br>Water Resources at (88<br>1223 | nation. For further in             | nformation contac           | complie at              |
| Please feel free to contact us at:<br>Phone: (867) 667-3171, Toll free (in Yukon)<br>Fax: (867) 667-3195 E-mail: Water.Resour  | : (1-800) 661-0408, local 3171)  | I have read the above<br>understand the purpo<br>collection of persona | clause and   | Signature of                       | Well Owner                  |                         |