



Department of Environment
 Water Resources Section
 Yukon Water Well Registry
 Box 2703 Whitehorse, Yukon, Y1A 2C6

WATER WELL DRILLERS FORM

Well Record Page 1 of 2

Well ID:
 To be assigned by Dept. Of Environment

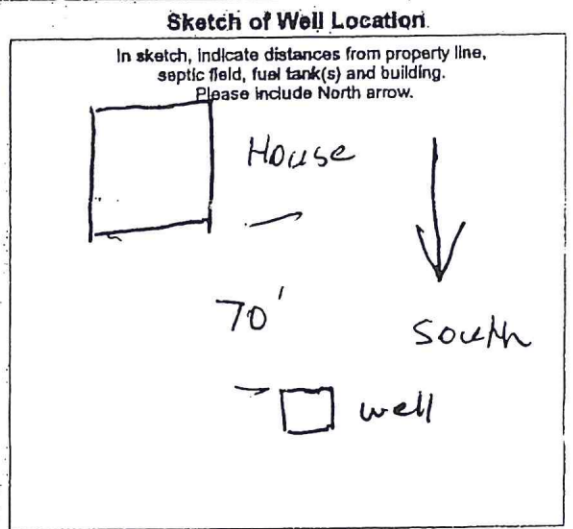
INSTRUCTIONS FOR COMPLETING THE FORM

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)
 First Name: XXXXXXXXXX Last Name: XXXXXXXXXX Company / Department / Organization:

A2 Drilled For: XXXXXXXXXX
 A3 Street Address of Well Location: Lot 1208 Plan 89-152
 A4 Town/Village/Area/Lot #: Takhini Hot Springs Rd
 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)

EXAMPLE ONLY →		(brown, grey, green, black, reddish, beige, olive, yellowish) brown	CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK	trace gravel some silt	MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard
			SAND		soft and saturated
Depth (m / ft)	B2 From	B4 General Colour	B5 Most Common Material	B6 Secondary Materials	B7 General Description
	0				
	101	Grey	Clay	Sand	Dry
	133	Grey	Sand	Gravel	Hard Saturated
	133	Grey	Fine sand	Water	Soft Saturated
	180	Grey	Clay	Sand	Dry
	212	Grey	Clay	Sand	Soft Saturated
	354	Grey	Clay + Sand	Fine Gravel	Hard Saturated
	386	Grey	Clay	Sand	Hard Saturated
	428	Grey	Sand		Soft Saturated
	434	Grey	Clay	Gravel	Saturated
	444	Grey	Gravel	Clay + coarse sand	Water

B8 Permafrost Encountered: NO YES If yes, indicated depth (m / ft): from: 0 to: 450

WELL CONSTRUCTION (Continues on Page 2)

Date Well Completed: 2 / 1 / 09 2 / 0 / 06
D D M M Y Y Y Y

Example: 31 01 2005

C1 Drilling Method: Air Rotary (Conventional) Dug Other (please specify)
 Reverse Air Rotary Cable Tool
 Mud Rotary Auger (Hollow / Solid Stem)

C2 Well Type: In what geological material is the water producing zone located?
 OVERBURDEN BEDROCK

C3 Outside Diameter: 6.625 (in / in)
 C4 Casing Material: Steel Plastic Other
 C5 Casing Wall Thickness: .250 (in / in)
 C6 Casing Depth to: 450 (m / ft)
 C7 Other Comments Regarding Casing:

WELL CONSTRUCTION (Continued from Page 1)

Surface / Environmental Seal (depth below ground surface, please circle appropriate units)

C8 Seal Material Type: Clay (Lo. Bentonite)
 C9 Diameter of Seal: 10 (cm / in)
 C10 Seal Depth from: 0 (m / ft)
 C11 Seal Depth to: 10 (m / ft)
 C12 Volume Placed: _____ (m³ / ft³)

Gravel Pack (depth below ground surface, please circle appropriate units)

C13 Gravel Pack: NO If yes, indicated depth (m / ft):
 YES from: _____ to: _____ Indicate diameter of material: _____ (mm / inches) Material type: _____ (i.e. silica)

Well Screen Information (depth below ground surface, please circle appropriate units)

C14 Outside Diameter: 4 (cm / in)
 C15 Screen Material: Stainless Steel Steel Plastic N/A Other _____
 C16 Screen Type: Continuous Wire Wrap Louver Screen Perforated Slotted Open Hoja
 C17 Depth from: _____ (m / ft) C18 Depth to: 455 (m / ft) Slot Size / Perforation Dia: 2003 Thou. / mm / inches
 Screen 1: _____ (m / ft) Screen 2: _____ (m / ft) Screen 3: _____ (m / ft)
 C19 Screen Comments: _____

WELL DEVELOPMENT AND STATUS

D1 Well Developed by: Surge Block Water Jetting Air Jetting / Air Lifting Bailing Pumping Other: _____
 D2 Well Head Completion: Well House Pitless Adaptor Depth of adaptor: _____ (m / ft) Well Pit (NOT PERMITTED) None (well not completed)
 D3 Well Head Stick-up (above ground surface): 18 (cm / in) inches 120 (m / ft) (Use negative if below grade)
 D4 Static Water Level (below top of casing): _____ (m / ft) (Use negative if below grade)
 D5 Well Yield Estimate: N/A (Lps / gpm.)
 D6 Final Well Status: Water Supply (In use) Not In use Stand by (Back-up) Observation Deepened Other: _____
 Abandoned Poor Quality Insufficient Yield
 D7 Well Abandonment Status: Was the well properly decommissioned with bentonite grout? YES NO If YES, indicate Date: _____
 D8 Method Used to Estimate Well Yield: Air Lifting Bailing Pumping Test (If test conducted, complete Pumping Test Record)

PUMPING TEST RECORD AND GROUNDWATER QUALITY

(All depths below ground, circle appropriate units)

E1 Pumping Test Information

Pumping Test Start Date: 2 5 0 9 | 0 6
 Static Water Level (SWL): 120 (m / ft)
 Pump Intake Set at: 450 (m / ft)
 Duration of pumping: 160 hrs _____ min
 Final Water Level (FWL) at end of Pumping Test: 140 (m / ft)

RECOMMENDATIONS

Recomm. Pump Depth: 450 (m / ft)
 Recomm. Pumping Rate: 10 (Lps / gpm)
 If flowing, provide rate: _____ (Lps / gpm)

F1 Well Water Level Drawdown/Recovery DATA

Drawdown		Recovery	
Time (min)	Water Level (m / ft)	Time (min)	Water Level (m / ft)
0 (SWL)		0 (FWL)	
1	120	1	140
2		2	
3		3	
4		4	
5		5	
10		10	
15		15	
20		20	
25		25	
30		30	
40		40	
50		50	
60		60	

G1 GROUNDWATER QUALITY

Field Data: Date Measurements Taken: 0 2 1 1 0 2 0 0 6
 Electrical Conductivity: _____ uS
 pH: _____
 Temperature: _____ °C
 Turbidity/Sand Content: Clear Slightly turbid/cloudy Moderately turbid/cloudy Turbid/cloudy Trace sand present No sand present
 Well Disinfection: Was the well disinfected upon completion of the pump installation? YES NO Briefly describe method of well disinfection: Chlorine

Bacteria Testing

Was a sample taken? YES NO Date Sample Taken: 2 4 1 1 0 2 0 0 6 If yes, indicate the name of the laboratory: Whose Hospital

Chemical Analysis of Water

Was a sample taken? YES NO Date Sample Taken: 1 8 1 1 1 2 0 0 6 If yes, indicate the name of the laboratory: Agua Tech

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company: 13636 Yukon Inc
 H2 Name of Driller(s): _____
 H3 Address: _____
 Signature of Primary Driller: _____ Date Submitted to Dept. Of Environment: _____

CONSULTANT (If applicable)

I1 Company Name: _____
 I2 Company Address: _____
 I3 Report Reference: _____
 I4 Report Date: _____

ADDITIONAL INSTRUCTIONS

Upon completing this form, please mail or fax it to:

Water Resources Section (V-310), Department of Environment, Government of Yukon
 Box 2703, Whitehorse, Yukon, Canada Y1A 2C8

Please feel free to contact us at:

Phone: (867) 667-3171, Toll free (In Yukon): (1-800) 661-0408, local 3171
 Fax: (867) 667-3195 E-mail: Water.Resources@gov.yk.ca