

Date: July 27/07

Well Owner: [Redacted]
Address: Shallow Bay
Phone: _____ Fax: _____

Contractor: Pathway Water Resources
Address: _____
Phone: [Redacted]
Driller: _____

General Information

Well Location: At owners address Other

Water Quality: Good Poor, why _____

Water Analysis: chemical Biological none

Comments: _____
Taste: _____

Water use: domestic Stock Garden
 Irrigation Heat pump Industry
 Community supply; number of connections _____
 Other _____

Aquifer: Rock Sand and gravel

Well Capacity

Capacity: dry hole Inadequate
 Satisfactory for proposed use

Capacity test: Bail test Air lift Pump test

Length of test: 8 hrs minutes Rate: 29pm

Water level at start: 82'

Drawdown at end: 130'

Estimated well capacity: 29pm.

Was a water sample taken at end of test? Yes No

Final well completion

Cover on casing Welded plate Pitless adaptor
 Aluminium cover Well seal

Casing: above ground In pit In old dug well

Is casing sealed? Yes No

If Yes, describe: _____

Is site protected from obvious hazards, ie. poor drainage, grazing animals, buried fuel tanks, etc. Yes No

If no, what can be done? _____
If well location cannot be described from a road address, please sketch approximate location on reverse side of file copy of well record or attach separate sheet.

Well Log		Metres <input type="checkbox"/>	Feet <input checked="" type="checkbox"/>
From	To	Description	
0	112	clay (grey)	
112	114	silty sand	
114	120	hard clay	
120	163	glacial till (rocks in clay)	
163	165	silty sand + gravel. very	
165	278'	bedrock little water.	

* If drilling is in rock, note depth of fractures which make water.

Well Construction

Surface Casing: Diameter 8"
Length 17' Stick up _____
 removed Left in place

Well Casing: Diameter 6"
Length 165' Stick up 18"
Wall thickness: 250

Casing shoe yes no

Completion: well screen slotted pipe
 open end other

Well screen: stainless galvanized steel
 plastic
from _____ to _____ slot width _____
from _____ to _____ slot width _____

Design based on: sieve analysis
 estimated slot size

Other screen data: _____

Development method: surge bail air
 water jet pump other _____

Static water level below ground: 82'
 flowing Rate: _____



COPY 72

Well Record Page 1 of 2
WATER WELL
DRILLERS FORM

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

Well ID:
To be assigned by Dept. Of Environment

- INSTRUCTIONS FOR COMPLETING THE FORM**
- Additional information is provided at the bottom of this form on page 2.
 - Question can be directed to Water Resources at 867 667-3171.
 - All well construction measurements shall be reported to 0.1 m or 0.3 ft.
 - Please print clearly in blue or black ink.
 - Completion and submission of this form is the responsibility of the drilling contractor.
 - 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)

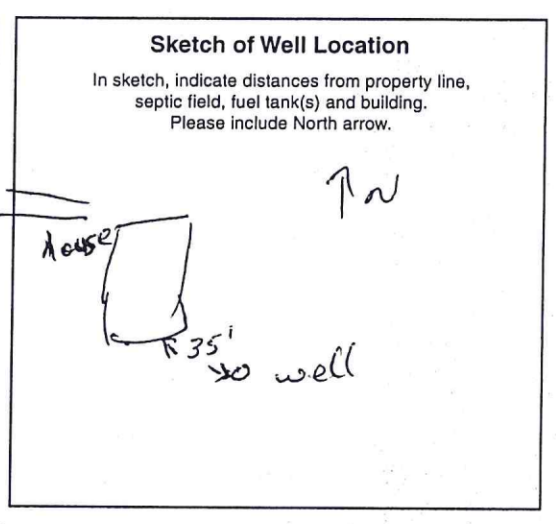
A2 Drilled For: Last Name: Company / Department / Organization:

A3 Street Address of Well Location: Shallow Bay

A4 Town / Village / Area / Lot #:

A5 UTM Coordinates (using handheld GPS): NAD 8 | 3 Zone |

135° 09.656 W Easting 60P 58.223 N Northing



A6 Elevation of Top of Casing: 2039 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)

Depth (m / ft) B2 From B3 To	B4 General Colour <small>(brown, grey, green, black, redish, beige, olive, yellowish)</small>	B5 Most Common Material <small>CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK</small>	B6 Secondary Materials <small>"trace" <10% (i.e. SILT trace gravel) "some" 10-20% (i.e. SAND some gravel) "silty / sandy / gravelly" 20-30% (i.e. silty SAND) "and sand" or "and gravel" 35-50%</small>		B7 General Description <small>MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard</small>
			trace gravel	some silt	
0 112	brown	SAND			soft and saturated
112 114	grey	clay			
114 120	grey	sand		silt	
120 163	grey	clay		rock rocks	hard
163 165	grey	silt		gravel + sand	hard
165	black	bedrock			very little water

A8 Permafrost Encountered: NO YES
If yes, indicated depth (m / ft): from: to:

WELL CONSTRUCTION (Continues on Page 2)

Date Well Completed 20070727 Example: 2005 01 31
Y Y Y Y M M D D

A1 Drilling Method Air Rotary (Conventional) Dug Other (please specify)

Reverse Air Rotary Cable Tool

Mud Rotary Auger (Hollow / Solid Stem)

A2 Well Type: In what geological material is the water producing zone located?
 OVERBURDEN BEDROCK

Casing (depth below ground surface, please circle appropriate units)

A3 Outside Diameter 6 (cm / in)

A4 Casing Material Steel Plastic Other

A5 Casing Wall Thickness .250 (cm / in)

A6 Casing Depth to: 165 (m / ft)

A7 Other Comments Regarding Casing:

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

C8 Seal Material Type: Bentonite (i.e. Bentonite) Ch. ps
C9 Diameter of Seal: 8 (cm/in)
C10 Seal Depth from: 8 (m/ft)
C11 Seal Depth to: 19 (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): 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 (cm / in)
C15 Screen Material: Stainless Steel, Steel, Plastic, N/A, Other
C16 Screen Type: Continuous Wire Wrap, Louver Screen, Perforated, Slotted, Open Hole
C17 Depth from: Screen 1, 2, 3
C18 Depth to: Screen 1, 2, 3
Slot Size / Perforation Dia: Screen 1, 2, 3
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, Well Pit, None
D3 Well Head Stick-up (above ground surface): 1.5 (m/ft)
D4 Static Water Level (below top of casing): 22 (m/ft)
D5 Well Yield Estimate: 2 (Lps / gpm)
D6 Final Well Status: Water Supply, Stand by, Observation, Not in use, Deepened, Other, Abandoned, Dry, Poor Quality, Insufficient Yield, Artesian conditions
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

PUMPING TEST RECORD AND GROUNDWATER QUALITY

(All depths below ground, circle appropriate units)

E1 Pumping Test Information

Pumping Test Start Date: Y Y Y Y M M D D

Static Water Level (SWL): (m / ft)

Pump Intake Set at: (m / ft)

Duration of pumping: hrs min

Final Water Level (FWL) at end of Pumping Test: (m / ft)

RECOMMENDATIONS

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

F1 Well Water Level Drawdown/Recovery DATA

Table with columns for Time (min) and Water Level (m / ft) for Drawdown and Recovery. Rows include 0 (SWL), 0 (FWL), 1, 2, 3, 4, 5, 10, 15, 20, 25, 30, 40, 50, 60.

G1 GROUNDWATER QUALITY

Field Data

Date Measurements Taken: Y Y Y Y M M D D

Electrical Conductivity: uS
pH:
Temperature: °C

Turbidity/Sand Content

Clear, Slightly turbid/cloudy, Moderately turbid/cloudy, Turbid/cloudy, Trace sand present, No sand present

Groundwater Type

Salty, Sulphur / Egg Odour, Organic Taste / Odour, Metallic Taste, Other:

Well Disinfection

Was the well disinfected upon completion of the pump installation? YES NO

Briefly describe method of well disinfection.

Bacteria Testing

Was a sample taken? YES NO. If yes, indicate the name of the laboratory.

Date Sample Taken: Y Y Y Y M M D D

Chemical Analysis of Water

Was a sample taken? YES NO. If yes, indicate the name of the laboratory.

Date Sample Taken: Y Y Y Y M M D D

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company: Pathway Water Resources
H2 Name of Driller(s):
H3 Address:
Date Submitted to Dept. Of Environment: Y Y Y Y M M D D

CONSULTANT (If applicable)

I 1 Company Name:
I 2 Company Address:
I 3 Report Reference:
I 4 Report Date: Y Y Y Y M M D D

ADDITIONAL INSTRUCTIONS

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

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

Water Resources Section (V-310), Department of Environment, Government of Yukon Box 2703, Whitehorse, Yukon, Canada Y1A 2C6

Personal information contained on this form is collected under the authority of the Access 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.

I have read the above clause and understand the purpose for collection of personal information.

Signature of Well Owner