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Yukon Government
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 [redacted] Last Name _____ Company / Department / Organization _____

A2 Drilled For:

A3 Street Address of Well Location: Burma Road.

A4 Town / Village / Area / Lot #: _____

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

Sketch of Well Location

In sketch, indicate distances from property line, septic field, fuel tank(s) and building. Please include North arrow.

LOG OF OVERBURDEN AND BEDROCK MATERIALS *(All depths are below ground surface, circle appropriate units, use descriptors provided)*

EXAMPLE ONLY →	*(brown, grey, green, black, redish, beige, olive, yellowish)*	*CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK*	*"trace" <10% (i.e. SILT trace gravel) "some" 10-20% (i.e. SAND some gravel) "silty / sandy / gravely" 20-30% (i.e. silty SAND) "and sand" or "and gravel" 35-50%*	*MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard*
	brown	SAND	trace gravel some silt	soft and saturated

Depth (m / ft) B2 From	B3 To	B4 General Colour	B5 Most Common Material	B6 Secondary Materials	B7 General Description
0	24	Brown	Sand		
24	115	grey	clay		
115	125	grey	sand	clay	
125	135	grey	clay	rocks.	
135	152	grey	Course sand	gravel.	some water
152	230	grey	clay	rocks	glacial till
230	253	grey	sand	gravel & silt.	some water but
253	255	grey	clay		tightly packed.
255	261	grey	sand.		clean w/ water

B8 Permafrost Encountered: ☒ NO ☐ YES If yes, indicated depth (m / ft): from: _____ to: _____

WELL CONSTRUCTION *(Continues on Page 2)*

Date Well Completed: 24 (D D) 08 (M M) 2007 (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

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

C3 Outside Diameter: 6 (cm / in)

C4 Casing Material: ☒ Steel ☐ Plastic

C5 Casing Wall Thickness: .250 (cm / in)

C6 Casing Depth to: 259'6" (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: Bentonite (i.e. Bentonite) chips | C9 Diameter of Seal: 8 (cm / in) | C10 Seal Depth from: 8- (m / ft) | C11 Seal Depth to: 14 (m / ft) | C12 Volume Placed: (m^3 / ft^3)

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

C13 Gravel Pack: ☒ NO ☐ YES | 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: 5 (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:	C18 Depth to:	Slot Size / Perforation Dia:
Screen 1.	257.5 (m / ft)	261 (m / ft)	.012 Thou. / mm / inches
Screen 2.	(m / ft)	(m / ft)	Thou. / mm / inches
Screen 3.	(m / ft)	(m / ft)	Thou. / mm / inches

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)*: 1-5 (m / ft) *(Use negative if below grade)*

D4 Static Water Level *(below top of casing)*: 28 (m / ft) *(Use negative if below grade)*

D5 Well Yield Estimate: 10 (Lps / gpm)

D6 Final Well Status
☐ Water Supply (In use) ☐ Not In use ☐ Abandoned ☐ Dry
☐ Stand by (Back-up) ☐ Deepened *If well was abandoned, please give reason:* ☐ Poor Quality
☐ Observation ☐ Other: ☐ Insufficient Yield

D7 Well Abandonment Status
Was the well properly decommissioned with bentonite grout? ☐ YES ☐ NO
If YES, Indicate Date: D D M M Y Y Y Y

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: D D M M Y Y Y Y

Static Water Level (SWL): 28 (m / ft)

Pump Intake Set at: 100 (m / ft)

Duration of pumping: 3 hrs ____ min

Final Water Level (FWL) at end of Pumping Test: 78 (m / ft)

RECOMMENDATIONS

Recomm. Pump Depth: 150 (m / ft)

Recomm. Pumping Rate: 10 (Lps / gpm)

If flowing, provide rate: ____ (Lps / gpm)

F1 Well Water Level Drawdown/Recovery DATA

Drawdown Time (min)	Drawdown Water Level (m / ft)	Recovery Time (min)	Recovery Water Level (m / ft)
0 (SWL)		0 (FWL)	
1		1	
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: D D M M Y Y Y Y
Electrical Conductivity: ____ uS
pH: ____
Temperature: ____ °C

Groundwater Type
☐ Salty ☐ Sulphur / Egg Odour ☐ Organic Taste / Odour ☐ Metallic Taste ☐ Other:

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.

Bacteria Testing
Was a sample taken? ☒ YES ☐ NO
Date Sample Taken: D D M M Y Y Y Y
If yes, indicate the name of the laboratory.

Chemical Analysis of Water
Was a sample taken? ☒ YES ☐ NO
Date Sample Taken: D D M M Y Y Y Y
If yes, indicate the name of the laboratory.

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company: Cathway Water Resources
H2 Name of Driller(s): [redacted]
H3 Address of Driller: [redacted]

Signature of Primary Driller: ____ D D M M Y Y Y Y Date Submitted to Dept. Of Environment

CONSULTANT *(If applicable)*

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

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 2C6

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