



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

Well ID: 204140298 To be assigned by Dept. Of Environment

WATER WELL DRILLERS FORM

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.

- 4. Please print clearly in blue or black ink.5. Completion and submission of this form is the responsibility of the drilling contractor.

3. All well construction measurements shall b	e reported to 0.1 m or 0.3 it.	6. Please spec	ify metric or imp	erial units for all measurements.	
WELL LOCATION AND OWNER'S INFORMATION		A1 Well Name:		Optional (i.e. City Well No. 2)	
First Name	Last Nar	me	Company / D	Department / Organization	
A2 Drilled For:		J I			
A3 Street Address of Well Location:	-ot 1282 Plan 93.	.97	-	tch of Well Location	
A4 Town / Village / Area / Lot #:	1050/14 Faulty To.	ners	septic f	dicate distances from property line, lield, fuel tank(s) and building. ease include North arrow.	
A5 UTM Coordinates (using handheld	GPS): NAD 8 3 Zon	e 08	Shop	Flority Septe	
4 7 9 2 6 0 Easting	6714 T.	2 7 0			
A6 Elevation of Top of Casing:	16 my ft ASL		\	g	
A7 Accuracy of GPS:	4-1255 +/-m/ft			J. Carol	
A8 Purpose of Wells ☐ Domestic ☐ Test Well ☐ Commercial ☐ Municipal ☐ Industrial ☐ Agricultural	☐ Irrigation ☐ Observation - Water Let☐ Public/Recreational		onmental (Qua <i>(please identii</i>		
LOG OF OVERBURDEN AND BEDROO	CK MATERIALS (All depths a	re below ground surfac	e, circle appropria	ate units, use descriptors provided)	
EXAMPLE (brown, grey, green, black, redish, beige, olive, yellowish) brown :	CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK SAND	'trace" <10% (i.e. SILT "some" 10-20% (l.e. SAN "silty / sandy / gravely" 20-30 "and sand" or "and gra trace gravel	D some gravel) % (i.e. silty SAND)	MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard soft and saturated	
Depth (m / ft) B2 From B3 To B4 General Colour	B5 Most Common Material	B6 Secondary N	laterials	B7 General Description	
0 64 gree 64 75 gree 75 78	gravel grave sand	Sand	\$114	course clean finc	
B8 Permafrost Encountered: NO	YES If yes, indicated dep	oth (m / ft): from:	to:		
WELL CONSTRUCTION (Continues on Page	Completed L	1010191012	019	Example: 2005 01 31	
C1 Drilling Method Air Rotary (Conven		Other (please	specify) C2 W	/ell Type: In what geological material is the water producing zone located? ☐-everBurden ☐ Bedroc	
Casing (depth below ground surface, please circle a C3 Outside C4 Casing Diameter (2)/(4) (cm/in)	ppropriate units) Material C5 Casing Wall Thic	kness C6 Casing		Other Comments Regarding Casing Dack filled Note to 75"	

Other ___

Surface / Environmental Sea	(depth below ground surface, please o	rircle appropriate units)			
C8 Seal Material Type: C9 (i.e. Bentonite)	Diameter of Seal: C10 Se	al Depth from: (m / ft)	C11 Seal Depth to:	C12 Volume Placed:	(m³ / ft³)
Gravel Pack (depth below ground su	rface, please circle appropriate units)				
	s, indicated depth (m / ft):				
☐ YES from		liameter of material:		erial type: e. silica)	
Well Screen Information (dept.	h below ground surface, please circle ap		Depth from: C18 Depth		
C14 Outside C15 Screen Mat	erial C16 Screen Type	Screen 1.	71 (m/ft) 75		ı./ mm / inche
Diameter (cm / in) ☐ Stainless	s Steel Continuous Wire Louver Screen	Wrap Screen 2. Screen 3.	(m / ft)		ı. / mm / inche
☐ Plastic	Perforated	C19 Screen	(m / ft)	(m / ft) Thou	u. / mm / inche
☐ N/A ☐ Other	Slotted Open Hole	Commen	ts:		
☐ Surge Block ☐ Weller Jetting ☐ Water Jetting ☐ Air Lifting ☐ Bailing ☐ We	Head Completion D3 Well ell House (abov tless Adaptor <u>Depth of</u> adaptor:	Head Stick-up ye ground surface)	D4 Static Water Level (below top of casing) (m / ft) (de) (Use negative if below grad	D8 Method Use	s/gpm)
D6 Final Well Status			Was the well properly decom	missioned Estimate We	
☑ Water Supply (in use) ☐ Not i ☐ Stand by (Back-up) ☐ Deep	noned #wall F	_ Dry	with bentonite grout? YE	☐ Bailing	
Observation Othe		Poor Quality	If YES, Indicate Date:	Pumping (If lest cond	ucted, complete
	give reason.	Artesian conditions	YYYYMM	Pumping Te.	st Hecora)
DIMPING TEST RECORD AN	ID OBOLINGWISH				
PUMPING TEST RECORD AN (All depths below ground, circle appropriate	ID GROUNDWATER QUALI	TY	F1 Well Water Level Dra Drawdown	awdown/Recovery DATA Recovery	
E1 Pumping Test Information	RECOMMENDATIONS		Time Water Level (min) (m / ft)	Time Water Level	
Pumping Test Start Date:	Recomm. Pump Depth:		(min) (m / ft) 0 (SWL)	(min) (m / ft) 0 (FWL)	
YYYYMMDD	(m /	ft)	1	1	
Static Water Level (SWL):	Recomm. Pumping Rate:		2	2	
(m / ft)		s / gpm)	3	3	
Pump Intake Set at:	:		4	4	
(m / ft)	If flowing, provide rate:	: / gpm)	5	5	
Duration of pumping:	[Lps	(7 gpm)	10	10	
hrs min			15	15	
Final Water Level (FWL)			20	20	
at end of Pumping Test: (m / ft)			25	25	
,			30	30	
G1 GROUNDWATER QUALITY	T. 1:19 10 1		40	40	
Field Data Date Measurements Taken:	Turbidity/Sand Content ☐ Clear		50	50	
Date Measurements Taken.	☐ Slightly turbid/cloudy		60	60	
YYYYMMDD	☐ Moderately turbid/cloud	a	Bacteria Testing Was a sample taken?	VEC TINO	
	☐ Turbid/cloudy	dy	Date Sample Taken:	res ☐ NO If yes, indi name of the	
Electrical Conductivity: uS	☐ Trace sand present		I I I I		
pH: °C	☐ No sand present	,	YYYYMM	D D	
Groundwater Type	Well Disinfection		Chemical Analysis of Wate		
☐ Salty		Y	Was a sample taken?	11 ,00, 111010	
☐ Sulphur / Egg Odour	Was the well disinfected upon of the pump installation?	completion ES NO	Date Sample Taken:	name of the i	laboratory.
☐ Organic Taste / Odour			YYYYMM	D D	
☐ Metallic Taste	Briefly describe method of well				
Other:	100-1-1900				
WELL CONTRACTOR			CONSULTANT (If applical	n/e)	
H1 Name of Contractor / Drilling Comp	any: Immat Well	(1) ril 1100	I 1 Company Name:		
H2 Name of Driller(s):		1119	I 2 Company Address:		
H3 Address of Driller:			I 3 Report Reference:		
	9101110	ONLIN	I 4 Report Date:		
Signature of Primary Driller	A A A A A A A A A A A A A A A A A A A	M M D D	Y	YYYMMD	
ADDITIONAL INSTRUCTIONS	Date Submitted to D		contained on this form is self-	Lunder the authority of the d	2000 10
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	Information and Prote public database of we	contained on this form is collected colin of Privacy (ATIPP) Act, Sec- ell and ground water information. y, Water Resources at (867) 667-3 1223.	ion 29 (c) and will be used to c For further information contact	ompile a

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

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

Signature of Well Owner