

WATER WELL DRILLERS FORM

Metric Imperial

105D14

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)

A2 Drilled For:

Company / Department / Organization

A3 Street Address of Well Location: **Takhini River Rd.**

Sketch of Well Location

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

A4 Town / Village / Area / Lot #: **1350**

A5 UTM Coordinates (using handheld GPS): NAD **83** Zone **8N**

474 693 Easting **6748 606** Northing **100-300m**

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 →	CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK		MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard		
	(brown, gray, green, black, reddish, beige, olive, yellowish)	SAND	trace gravel	some silt	
Depth (m / ft) B2 From B3 To	B4 General Colour	B5 Most Common Material	B6 Secondary Materials		B7 General Description
0 11	brown	SAND	-		soft - dry
11 298	gray	Fine clay	-		soft - dry
298 314	gray	Fine SAND	-		soft - saturated

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

WELL CONSTRUCTION (Continues on Page 2)

Date Well Completed **2014 08 30**

Example: 2005 01 31

- 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 **6.5** (cm / in)

C4 Casing Material Steel Plastic Other

C5 Casing Wall Thickness **3/4** (cm / in)

C6 Casing Depth to: **308** (m / ft)

C7 Other Comments Regarding Casing:

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

C8 Seal Material Type: Bentond (i.e. Bentonite)
 C9 Diameter of Seal: 10 (cm / in)
 C10 Seal Depth from: 18 (m / ft)
 C11 Seal Depth to: 10 (m / ft)
 C12 Volume Placed: 4 bags (m³ / ft³)

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

C13 Gravel Pack: N/A 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: 570 (m / ft)
 C18 Depth to: 306 (m / ft)
 Slot Size / Perforation Dia: 8 Thou. / mm / inches
 Screen 1: 570 (m / ft) 306 (m / ft) 8 Thou. / mm / inches
 Screen 2: 374 (m / ft) 300 (m / ft) 8 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): 205 (m / ft) (Use negative if below grade)
 D4 Static Water Level (below top of casing): 152 (m / ft) (Use negative if below grade)
 D5 Well Yield Estimate: 4.75 (Lps / gpm)
 D6 Final Well Status: Water Supply (in use) Stand by (Back-up) 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 (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: 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

Drawdown		Recovery	
Time (min)	Water Level (m / ft)	Time (min)	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: 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

Clear Form **Print Form**

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company: CATHWAY WATER
 H2 Name of Driller(s):
 H3 Address:
 Signature of Primary Driller:
 Date Submitted to Dept. Of Environment: Y Y Y Y M M D D

CONSULTANT (if applicable)

I1 Company Name:
 I2 Company Address:
 I3 Report Reference:
 I4 Report Date: Y Y Y Y M M D D

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

Personal information contained on this form is collected under the authority of the Access to Information and Protection of Privacy (ATIPPA) Act, Section 29 (c) and will be used to compile a public database of well and ground water information. For further information contact the Manager of Hydrology, Water Resources at (867) 667-3223, toll free within Yukon 1-800-661-0408 Ext 3223.

I have read the above clause and understand the purpose for collection of personal information.
 Signature of Well Owner: