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

204140324

To be assigned by Dept. Of Environment

Well Record Page 1 of 2 WATER WELL DRILLERS FORM

Metric O Imperial O

INSTRUCTIONS FOR COMPLETING THE FORM

1. Additional information is provided at the bottom of this form on page 2.

Well ID:

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

	directed to Water Resou tion measurements shall	rces at 867 667-3171. be reported to 0.1 m or 0.3 ft.	the drilling contracto 6. Please specify metri	r. c or imperial units for all measurements.		
ELL LOCATIO	N AND OWNER'S INF	ORMATION	A1 Well Name:	Optional (i.e. City Well No. 2)		
2 Drilled For:			Takin	mpany/Department/Organization im Hot Springs Ud		
3 Street Addre	ss of Well Location:	Takhini Hot S	J	Sketch of Well Location sketch, indicate distances from properly line, septic field, fuel tank(s) and building.	. ×	
	e / Area / Lot #: Lo			Pleaso include North arrow.		
5 U IM Coordin	nates (using handheld	d GPS): NAD 8 3 Zo	ne			
	sting Top of CasIng:	Northing m / ft ASL		, ,		
7 Accuracy of	GPS:	+/- m / ft				
8 Purpose of W Domestic Commercia Industrial	☐ Test Well	☐ Irrigation ☐ Observation - Water Le	☐ Environmenta			
OG OF OVERB	URDEN AND BEDRO	CK MATERIALS (All depths	are below ground surface, circle a	appropriate units, use descriptors provided)		
EXAMPLE ONLY	(brown, grey, green, black, redish, belge, olive, yellowish)	CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK	"trace" <10% (i.e. SiLT trace grave "some" 10-20% (i.e. SAND some gra "sitty / sandy / gravely" 20-30% (i.e. sity "and sand" or "and gravel" 35-50%	SAND) MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard		
Depth (m/ft)	B4 General Colour	SAND B5 Most Common Material	trace gravel some silt B6 Secondary Materials	soft and saturated B7 General Description		
© 20 20 40	Brown Osey	Crawleday Clay	30/10/avel	Hard Soft		
55 60 60 80	black black	Bed Soct	30°18 (F.M.	Hard Hard		
30 100 100 100	black black	Bed sock		Hard Hard Soft, wet		
0 140 20 140 140 160	Broat Gree	Bod soct Bod soct		Herd.		
70 180	Purple red	Red Soctilite		s. IT/ Wet 10g	al	
80 200	Black Grey Blacky Grey Red Alber	Bed Jock		Itard Itard	5 80c	
8 Permafirdst E ELL CONSTRU	Incountered: ANO L	YES Fes, indicated dep	10/4/05/04	Example: 2005 01 31		
1 Drilling Meth	od Air Rotary (Conven	lional) Dug	Other (please specify)	C2 Well Type: In what geological material is the water producing zone located?		
	Reverse Air Rotary	Cable Tool Auger (Hollow / Solid	Stem)	OVERBURDEN BEDROCK		

YG(5302)F2 Rev. 09:2006

C3 Outside Diameter

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

Steel | Plastic | Other |

C4 Casing Material C5 Casing Wall Thickness

Clear Form

C6 Casing Depth to:

Print Form

C7 Other Comments Regarding Casing:

Surface / Environmental Seal C8 Seal Material Type: C9 13 Survey C1 (i.e. Bentonite)		I Depth from:	C11 Seal Depth to:	C12 Volume Pla	ced: (m³/ft³)		
Gravel Pack (depth below ground surfa	ace, please circle appropriate units)	***************************************	, v				
	indicated depth (m / ft):	ameter of material:		erial type:			
Well Screen Information (depth	below ground surface, please circle appl	ropriate units) C17	Depth from: C18 Depth	to: Slot Size	Perforation Dia: Thou./mm/inches		
C14 Outside C15 Screen Mate Diameter		Screen 2	(m/ft) [(m/ft) (m/ft)	Thou, / mm / inches Thou, / mm / inches		
Surge Block Wel Water Jetting Pitle Air Jetting / Air Lifting Bailing Wel	lead Completion Il House ess Adaptor Depth of adaptor: (m /ft) Il Pri (NOT PERMITTED) ne (well not completed) n use Abandoned Il well was elened Il well was gave reason:		Well Abandonment Status Was the well properly decom with bentonite grout? YES. Indicate Date:	D8 Method Estima S	(Lps/gpm) Used to te Well Yield Lifting		
PUMPING TEST RECORD AN	D GROUNDWATER QUALIT	TY	F1 Well Water Level Dra		ATA		
(All depths below ground, circle appropriate	units)		Drawdown Time Water Level	Recovery Time Water Le	vel		
E1 Pumping Test Information Pumping Test Start Date:	RECOMMENDATIONS		(min) (m / ft)	(min) (m / ft			
rumping test start bate.	Recomm. Pump Depth:		0 (SWL)	0 (FWL)			
YYYYMMDD	(m/	ft)	1	1			
Static Water Level (SWL):	Recomm. Pumping Rate:		2	2	_		
(m/ft)	(Lps	s/gpm)	3	3			
Pump Intake Set at:	If the view was side asked		4	4	_		
(m/ft)	If flowing, provide rate:	s/gpm)	5	5			
Duration of pumping:	(cps	, ap /	10	10	_		
hrs min			15	15			
Final Water Level (FWL)			20	20	_		
at end of Pumping Test:			25	25			
(m/ft)			30	30			
G1 GROUNDWATER QUALITY			40	40	_		
Field Data	Turbidity/Sand Content		50	50			
Date Measurements Taken:	Clear		60	60			
YYYMMDD	☐ Slightly turbid/cloudy		Bacteria Testing Was a sample taken?	VES TIND	- 3- #- 4- #-		
YYYMMDD	Moderately turbid/cloud	ay	Date Sample Taken:		es, indicate the of the laboratory:		
Electrical Conductivity: uS	☐ Turbid/cloudy			- 1 T			
pH:	☐ Trace sand present		YYYYMN	1 D D			
Temperature: C	☐ No sand present		Chemical Analysis of Water	er			
Groundwater Type	Well Disinfection		Was a sample taken?		s, indicate the		
☐ Salty	Was the well disinfected upon of the pump installation?		Date Sample Taken:	name	of the laboratory.		
☐ Sulphur / Egg Odour	Y and pump andication.	ES NO	Y Y Y M M	L			
Organic Taste / Odour	Briefly describe method of well	disinfection.	YYYYM				
Metallic Taste			Clear Form	Print Form			
Other:			Expansion and a second of				
WELL CONTRACTOR	1 months of property and the second		CONSULTANT (If applica	able)			
H1 Name of Contractor / Drilling Comp	any: lathusona lis	atel	I 1 Company Name:				
H2 Name of Driller(s):			12 Company Address:				
H3 Address of Driller:			I 3 Report Reference:				
Signature of Primary Druter	Date Submitted to D	M M D D Dept. Of Environment	I 4 Report Date:	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, Whitenorse, Yukon, Canada Y1A 2C6	Information and Pro public database of v Manager of Hydrolo 1-800-661-0408 Ext		ction 29 (c) and will be us For further information of	sed to compile a contact the		
Please feel free to contact us at: 1 have read the above clause and understand the purpose for collection of personal information. Fax: (867) 667-3195 E-mail: Water.Resources@govyk.ca collection of personal information. Signature of Well Owner							