# 193 105E03



Department of Environment Water Resources Section V-310 Yukon Water Well Registry Box 2703 Whitehorse, Yukon Y1A 2C6 205030020
To be assigned by Dept. Of Environment

## **WATER WELL**

Well Record Page 1 of

## DRILLERS FORM

## INSTRUCTIONS FOR COMPLETING THE FORM

- 1. Additional information is provided at the bottom of this form on page 2.
- 4. Please print clearly in blue or black ink.
- 5. Completion and submission of this form is the responsibility c

	the drilling contractor. Please specify metric or im	perial units for all measurements.			
WELL LOCATION AND OWNER'S INFORMATION A1 W	ell Name:	Optional (i.e. City Well No. 2)			
A2 Drilled For:	Company / I	Department / Organization			
A3 Street Address of Well Location: Where Y.T Sketch of Well Location					
A4 Town / Village / Area / Lot #: 1096 G172 Ly Uc (Lazy  In sketch, indicate distances from property line, septic field, fuel tank(s) and building.  Please include North arrow.					
A5 UTM Coordinates (using handheld GPS): NAD 8 3 Zone		1			
4 3 7 9 6 6 6 7 6 4 9 3  Easting Northing		Priveway			
A6 Elevation of Top of Casing: 754 m/ft ASL	house	well			
A7 Accuracy of GPS: +/- m / ft		Alaska Huy			
A8 Purpose of Wells  Domestic Test Well Irrigation Environmental (Quality)  Commercial Municipal Observation - Water Level Industrial Agricultural Public/Recreational					
LOG OF OVERBURDEN AND BEDROCK MATERIALS (All depths are below of	ground surface, circle appropri	ate units, use descriptors provided)			
EXAMPLE (brown, grey, green, black, CLAY, SILT, SAND, GRAVEL, "silty / sandy COBBLES, BOULDERS, BEDROCK" and s	"<10% (i.e. SILT trace gravel) 10-20% (i.e. SAND some gravel) 1/ gravely" 20-30% (i.e. silty SAND) 1/ gravely" 20-30% (i.e. silty SAND) 1/ gravel 35-50% 1/ gravel some silt	MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard soft and saturated			
B2 From B3 To	6 Secondary Materials	B7 General Description			
	large				
40 45 Brown Sand Clay 5	and	3			
73 Brown Grey grant	s and	pressur 120d			
	,				
B8 Permafrost Encountered: NO YES If yes, indicated depth ( m / ft )	): from: to:				
WELL CONSTRUCTION (Continues on Page 2)  Date Well Completed	2018 I	Example: 2005 01 31			
	ther (please specify) C2 W	'ell Type: In what geological material is the water producing zone located?			
☐ Reverse Air Rotary ☐ Cable Tool ☐ Mud Rotary ☐ Auger (Hollow / Solid Stem)		☑ OVERBURDEN			
Casing (depth below ground surface, please circle appropriate units)	C6 Casing Depth to:	Other Comments Regarding Casing			

:05 E 03

Surface / Environmental Sea	(depth below ground surface, please c	ircle appropriate units)		No. 1
		al Depth from:	C11 Seal Depth to:	C12 Volume Placed: ( m³ / ft³)
Gravel Pack (depth below ground sur	face, please circle appropriate units)	***************************************		
	, indicated depth ( m / ft ):	liameter of material:		rial type:
Well Screen Information (depth	below ground surface, please circle ap	propriate units) C17 De	epth from: C18 Depth	
C14 Outside C15 Screen Mate  Diameter (cm / in) Stainless  Plastic N/A Other	erial C16 Screen Type	Screen 1.	(m / ft) 75 (m / ft) (m / ft)	(m / ft)
Surge Block  Water Jetting  Air Jetting / Air Lifting Bailing Pumping Other:  D6 Final Well Status  Water Supply (in use) Stand by (Back-up) Observation  We We Pitt	Head Completion D3 Well III House (above  ess Adaptor Depth of adaptor:  [	pe ground surface)  (m / ft)  (se negative if below grade)  D7 Wi  Wit  Dry  Poor Quality  Insufficient Yield  Artesian conditions	ell Abandonment Status as the well properly decomment the bentonite grout? YES NO YES, Indicate Date: YYYYMMD	D8 Method Used to Estimate Well Yield Air Lifting Bailing Pumping Test (If lest conducted, comp. Pumping Test Record)
PUMPING TEST RECORD AN (All depths below ground, circle appropriate 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)  G1 GROUNDWATER QUALITY  Field Data  Date Measurements Taken:  Y Y Y Y M M D D  Electrical Conductivity:  y H:  Temperature:  CGroundwater Type  Salty  Sulphur / Egg Odour  Organic Taste / Odour  Metallic Taste	RECOMMENDATIONS Recomm. Pump Depth:  (m / Recomm. Pumping Rate:  (Lps  If flowing, provide rate:  (Lps  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 of the pump installation?	It)  If / gpm)  If / g	F1 Well Water Level Draw Drawdown  Time Water Level (min) (m / ft)  0 (SWL)  1  2  3  4  5  10  15  20  25  30  40  50  60  acteria Testing  Was a sample taken?  Date Sample Taken:  Y Y Y M M  hemical Analysis of Water  Was a sample taken?  Date Sample Taken:	Recovery  Time (min) (m / ft)  0 (FWL)  1  2  3  4  5  10  15  20  25  30  40  50  60  ES NO If yes, indicate the name of the laborator
WELL CONTRACTOR H1 Name of Contractor / Drilling Compa	Thu Oan Wald	$\Omega$	CONSULTANT (If applicable of the company Name:	e)
H2 Name of Driller(s):			1 2 Company Address:	
H3 Address of Driller:			I 3 Report Reference:	
	Date Submitted to D	MMDD	I 4 Report Date:	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 2C6	Personal information con Information and Protection public database of well a	on of Privacy (ATIPP) Act, Section and ground water information. Fo Vater Resources at (867) 667-32	under the authority of the Access to on 29 (c) and will be used to compile a or further information contact the 123, toll free within Yukon
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				gnature of Well Owner