

## WATER WELL DRILLERS FORM

Well ID:

To be assigned by Dept. Of Environment

### INSTRUCTIONS FOR COMPLETING THE FORM

- Additional information is provided at the bottom of this form on page 2.
- Question can be directed to Water Resources at 867 667-3171.
- All well construction measurements shall be reported to 0.1 m or 0.3 ft.
- Please print clearly in blue or black ink.
- Completion and submission of this form is the responsibility of the drilling contractor.
- 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

Last Name

Company / Department / Organization

A2 Drilled For:

A3 Street Address of Well Location:

A4 Town / Village / Area / Lot #:

LOT 1103, PLAN 66314, QUAD 105D/14

A5 UTM Coordinates (using handheld GPS): NAD   Zone

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Easting

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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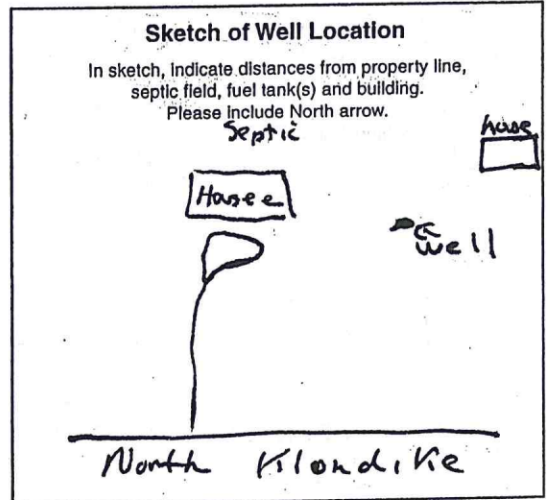
Northing

A6 Elevation of Top of Casing:  m / ft ASL

A7 Accuracy of GPS:  +/- m / ft

### A8 Purpose of Wells

- |  |                                       |  |  |
|--|---------------------------------------|--|--|
| <input checked="" type="checkbox"/> Domestic | <input type="checkbox"/> Test Well    | <input type="checkbox"/> Irrigation                | <input type="checkbox"/> Environmental (Quality)     |
| <input type="checkbox"/> Commercial          | <input type="checkbox"/> Municipal    | <input type="checkbox"/> Observation - Water Level | <input type="checkbox"/> Other (please identify use) |
| <input type="checkbox"/> Industrial          | <input type="checkbox"/> Agricultural | <input type="checkbox"/> Public/Recreational       | <input type="text"/>                                 |



### 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 / gravelly" 20-30% (i.e. silty SAND)  
"and sand" or "and gravel" 35-50%

MOISTURE: dry / moist / saturated (wet)  
HARDNESS: soft / hard / very hard

Depth (m / ft)		B4 General Colour	B5 Most Common Material	B6 Secondary Materials	B7 General Description
B2 From	B3 To				
0	220	grey	Silt	Sand Clay	moist
220	256	grey	Silt	Sand gravel	moist
256	560	black	bedrock		dry

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

### WELL CONSTRUCTION (Continues on Page 2)

Date Well Completed   
Y Y Y Y M M D D

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

C3 Outside Diameter  (cm / in)  
C4 Casing Material  Steel  Plastic  Other  
C5 Casing Wall Thickness  (cm / in)  
C6 Casing Depth to:  (m / ft)  
PUC. From 110' - 410'

C7 Other Comments Regarding Casing:

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

C8 Seal Material Type: Bentonite (i.e. Bentonite)
C9 Diameter of Seal: 10" X 15" (cm / in)
C10 Seal Depth from: (m / ft)
C11 Seal Depth to: (m / ft)
C12 Volume Placed: (m³ / ft³)

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

C13 Gravel Pack: NO If yes, indicated depth (m / ft):
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 (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: (m / ft)
C18 Depth to: (m / ft)
Slot Size / Perforation Dia: (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, Well Pit (NOT PERMITTED), None
D3 Well Head Stick-up (above ground surface): 18" (m / ft)
D4 Static Water Level (below top of casing): 100' (m / ft)
D5 Well Yield Estimate: 3 (Lps / gpm)
D7 Well Abandonment Status: Was the well properly decommissioned with bentonite grout? YES/NO
D8 Method Used to Estimate Well Yield: Air Lifting, Bailing, Pumping Test

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

Table with 4 columns: Time (min), Water Level (m / ft) Drawdown, Time (min), Water Level (m / ft) Recovery. Rows 0-60.

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.

Bleach

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)

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company: Impact Well Drilling
H2 Name of Driller(s):
H3 Address of Driller:
Date Submitted to Dept. Of Environment: 20110013

CONSULTANT (If applicable)

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

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 contained on this form is collected under the authority of the Access to Information and Protection of Privacy (ATIP) Act, Section 29 (c) and will be used to compile a public database of well and ground water information.

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

Signature of Well Owner