



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

Y1180

Well ID:

To be assigned by Dept. Of Environment

**WATER WELL
DRILLERS FORM**

Metric Imperial

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:

A3 Street Address of Well Location:

A4 Town / Village / Area / Lot #:

A5 UTM Coordinates (using handheld GPS): NAD Zone

Easting Northing

A6 Elevation of Top of Casing: m (NASL)

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

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

LOG OF OVERBURDEN AND BEDROCK MATERIALS (All depths are below ground surface, circle appropriate units, use descriptors provided)

Depth (m) B2 From: B3 To:	B4 General Colour	B5 Most Common Material	B6 Secondary Materials		B7 General Description
			trace gravel	some silt	
0 - 6	BROWN	SAND			
6 - 40	"	CLAY			
40 - 236	GREY	"			
236 - 259	GREY	"			
259 - 270	"	GRAVEL	SAND		

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

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

C3 Outside Diameter: (cm) (in)
C4 Casing Material: Steel Plastic Other
C5 Casing Wall Thickness: (mm) (in)
C6 Casing Depth to: (m) (ft)

C7 Other Comments Regarding Casing:

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

C8 Seal Material Type: Bentonite (Bentonite)
C9 Diameter of Seal: 100 mm
C10 Seal Depth from: 1.5 m
C11 Seal Depth to: 1.5 m
C12 Volume Placed: 1.5 m

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

C13 Gravel Pack: YES
Indicate depth from: to: Indicate diameter of material: Material type: silica

Well Screen Information (depth below ground surface, please circle appropriate units)

C14 Outside Diameter: 100 mm
C15 Screen Material: Stainless Steel
C16 Screen Type: Perforated
C17 Depth from: 2.65 m
C18 Depth to: 2.65 m
Slot Size / Perforation Dia: 1.2 mm

WELL DEVELOPMENT AND STATUS

D1 Well Developed by: Air Jetting / Air Lifting
D2 Well Head Completion: Well Head
D3 Well Head Stick-up: 2 m
D4 Static Water Level: 1.5 m
D5 Well Yield Estimate: 12 Lps
D6 Final Well Status: Water Supply (in use)
D7 Well Abandonment Status: YES
D8 Method Used to Estimate Well Yield: Pumping Test

PUMPING TEST RECORD AND GROUNDWATER QUALITY

(All depths below ground, circle appropriate units)

E1 Pumping Test Information

Pumping Test Start Date:
Static Water Level (SWL): 10 m
Pump intake set at: 10 m
Duration of pumping: 10 hrs 10 min
Final Water Level (FWL) at end of Pumping Test: 10 m

RECOMMENDATIONS

Recomm. Pump Depth: 10 m
Recomm. Pumping Rate: 10 Lps
If flowing, provide rate: 10 Lps

F1 Well Water Level Drawdown/Recovery DATA

Table with 4 columns: Time (min), Water Level (m), Time (min), Water Level (m). Rows for drawdown (SWL) and recovery (FWL) at 1, 2, 3, 4, 5, 10, 15, 20, 25, 30, 40, 50, 60 minutes.

G1 GROUNDWATER QUALITY

Field Data

Date Measurements Taken:
Electrical Conductivity:
pH:
Temperature:

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
Date Sample Taken:
Name of the laboratory:

Chemical Analysis of Water

Was a sample taken? YES NO
Date Sample Taken:
Name of the laboratory:

WELL CONTRACTOR

H1 Name of Contractor:
H2 Name of Driller:
H3 Address of Driller:
Date Submitted to Dept. of Environment: 2020 07 09

CONSULTANT (if applicable)

F1 Company Name:
F2 Company Address:
F3 Report Reference:
F4 Report Date:

ADDITIONAL INSTRUCTIONS

Upon completing this form, please mail a fax to:
Water Resources Section (V 310), Department of Environment, Government House, 27 St. James Street, Waterlooville, ANU Centre 216, 216

Personal information contained in this form is collected under the authority of the Access to Information and Protection of Privacy (AIPPA) Act, Section 21(1) and will be used to compile a public database of well and groundwater information. For further information, contact the Manager of Hydrology, Water Resources Section, 27 St. James Street, Waterlooville, ANU Centre 216, 216. I have read the above clause and understand the purpose for collection of personal information. Signature of Well Owner: