



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

41230

Well ID:  To be assigned by Dept. Of Environment

Well Record Page 1 of 2  
**WATER WELL  
DRILLERS FORM**

Metric  Imperial

**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)

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  ASL

A7 Accuracy of GPS:  +/- m /

**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) (ft)	EXAMPLE ONLY		CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK		MOISTURE dry / moist / saturated (wet)	
	B4 General Colour	B5 Most Common Material	B6 Secondary Materials	B7 General Description	HARDNESS soft / hard / very hard	soft and saturated
0 - 20	BROWN	ROCK	CLAY			
20 - 55	GREY	CLAY				
55 - 60	"	SILT				
60 - 75	"	GRAVEL	SAND / SILT			
75 - 80	"	CLAY				
80 - 104	WHITE	ROCK	CLAY			
140 - 160	GREY	BEDROCK				
160 - 210	BL / GR / WH	"				
210 - 300	BLACK	"				

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

**WELL CONSTRUCTION** (Continue 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 / m)

C4 Casing Material  Steel  Plastic  Other

C5 Casing Wall Thickness  (cm / 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 (i.e. Bentonite)  
 C9 Diameter of Seal: 10 (cm) (ft)  
 C10 Seal Depth from: 0 (m) (ft)  
 C11 Seal Depth to: 15 (m) (ft)  
 C12 Volume Placed: (m<sup>3</sup>) (ft<sup>3</sup>)

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

C13 Gravel Pack:  NO If yes, indicated depth (m) (ft).  
 YES 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 (cm) (ft)  
 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: C18 Depth to: Slot Size / Perforation Dia.  
 Screen 1: Screen 2: Screen 3:  
 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): 2 (m) (ft) (Use negative if below grade)  
 D4 Static Water Level (below top of casing): 63 (m) (ft) (Use negative if below grade)  
 D5 Well Yield Estimate: 8 (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: Y Y Y Y M M D D  
 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

Groundwater Type  
 Salty  Sulphur / Egg Odour  Organic Taste / Odour  Metallic Taste  Other:

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 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

WELL CONTRACTOR

H1 Name: [Redacted]  
 H2 Name: [Redacted]  
 H3 Address: [Redacted]

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 (V310), Department of Environment, Government of Yukon Box 2703, Whitehorse Yukon Canada Y1A 2C6  
 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 (ATIP/PI) 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