

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) (R)

C10 Seal Depth from: 0 (m) (R)

C11 Seal Depth to: 15 (m) (R)

C12 Volume Placed: _____ (m³) (R)

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

C13 Gravel Pack: NO YES If yes, indicated depth (m) (R): _____
 from: _____ to: _____ Indicate diameter of material: _____ (mm) (R) Material type: _____
 (i.e. silica)

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

C14 Outside Diameter (cm) (R): 6

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) (R)

C18 Depth to: _____ (m) (R)

Slot Size / Perforation Dia: _____ Thou / mm / (in) (R)

Screen 1: _____ (m) (R) _____ (m) (R) _____ (m) (R)

Screen 2: _____ (m) (R) _____ (m) (R) _____ (m) (R)

Screen 3: _____ (m) (R) _____ (m) (R) _____ (m) (R)

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 Pileas Adaptor Depth of adaptor: 0 (m) (R) Well Pit (NOT PERMITTED) None (well not completed)

D3 Well Head Stick-up (above ground surface): 2 (m) (R) (Use negative if below grade)

D4 Static Water Level (below top of casing): 15 (m) (R) (Use negative if below grade)

D5 Well Yield Estimate: 0.6 (Lps / (gph))

D6 Final Well Status: Water Supply (in use) Stand by (Back-up) Observation Not in use Deepened Other: _____ Abandoned if well was abandoned please give reason 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) (R)

Pump Intake Set at: _____ (m) (R)

Duration of pumping: _____ hrs _____ min

Final Water Level (FWL) at end of Pumping Test: _____ (m) (R)

RECOMMENDATIONS

Recomm Pump Depth: _____ (m) (R)

Recomm Pumping Rate: _____ (Lps / (gph))

If flowing, provide rate: _____ (Lps / (gph))

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

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 If yes, indicate the name of the laboratory.

Date Sample Taken: 2022 02 26 _____ 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: _____

H2 Name of Driller(s): _____

H3 Address of Driller: _____

Signature of Primary Driller: _____ Y Y Y Y M M D D

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 to:

Water Resources Section (V-310), Department of Environment, Government of Yukon, Box 2703, Whitehorse, Yukon, Canada Y1A 2C8

Please feel free to contact us at Phone: (867) 667-3171 Toll free (in Yukon) (1-800) 661-0408 (over 3171) Fax: (867) 667-3175 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) 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 3273

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

Signature of Well Owner: _____