

Owner name: _____

Mailing address: _____ City / Town: Whitcomb Prov. / Terr. VT Postal Code _____

Well Location Address: Street No. 116 Street name Wan Eagle Way City / Town Ravens Ridge

Legal description: Lot _____ Plan _____ D.L. _____ Block _____

PID: _____ AND Description of well location (attach sketch if nec.): to the Right of Property

NAD 83: Zone: _____ UTM Easting: 08492303Em Latitude: _____

UTM Northing: 673782Nm Longitude: _____

Method of drilling: air rotary dual rotary cable tool mud rotary auger driving jetting other (specify) _____

Orientation of well: vertical horizontal Ground elevation 765 ft (asl) Method: _____

Class of well: _____

Water supply wells, indicate water use: private domestic water supply system irrigation commercial or industrial

other (specify) _____

LITHOLOGIC DESCRIPTION		Surficial Material								Bedrock Material								Color								Hardness				Water Content				Observations (e.g. other geological materials (e.g. boulders), est. water bearing flow (USgpm), or closure details)			
From ft (bgl)	To ft (bgl)	Clay	Silt	Till	Sand with clay/silt	Sand, fine-med	Sand, med-coarse	Sand with gravel	Siltstone/Shale	Sandstone	Granodiorite	Limestone	Basalt	Volcanic	Crystalline	Other Surficial Bedrock	Red	Orange	Brown	Black	Light Grey	Blue	Green	Dark Grey	Very Hard	Hard	Dense / Stiff	Loose	Dry	Moist	Wet	High Production	Lost circulation		Not available		
0	7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	clay rock decomposed B.R.
7	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.5 Hard	
14	65	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	saturated water	
65	115	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
115	155	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
155	297	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

CASING DETAILS						SCREEN DETAILS				
From ft (bgl)	To ft (bgl)	Dia in	Casing Material / Open Hole	Wall Thickness in	Drive Shoe	From ft (bgl)	To ft (bgl)	Dia in	Type	Slot Size
0	18	6 5/8	Steel	2 1/4	D.R.					

Surface seal: Type Benbark Depth 15 ft

Method of installation Poured Pumped Thickness 10 in

Backfill: Type _____ Depth _____ ft

Liner: PVC Other (specify): _____

Diameter 4.5 in Thickness 250 in

From 17 ft (bgl) To 297 ft (bgl)

Perforated: From 252 ft (bgl) To 297 ft (bgl)

Intake: Screen Open bottom Uncased hole

Screen type: Telescope Pipe size

Screen material: Stainless steel Plastic Other: _____

Screen opening: Continuous slot Slotted Perforated pipe

Screen bottom: Bail Plug Plate Other: _____

Filter pack: From _____ ft To: _____ ft Thickness: _____ in

Type and size of material: _____

DEVELOPED BY	FINAL WELL COMPLETION DATA
<input checked="" type="checkbox"/> Air lifting <input type="checkbox"/> Surging <input type="checkbox"/> Jetting <input type="checkbox"/> Pumping <input type="checkbox"/> Bailing Other (specify): _____ Total duration: _____ hrs Notes: _____	Total depth drilled: <u>297</u> ft Finished well depth: <u>297</u> ft (bgl) Final stick up: <u>18</u> in Depth to bedrock: <u>141</u> ft (bgl) SWL: _____ ft (bgl) Estimated well yield <u>1/2</u> USgpm Artesian flow: _____ USgpm, or Artesian pressure: _____ ft Type of well cap: <u>locking</u> Well disinfected: <input type="checkbox"/> Yes <input type="checkbox"/> No Where well ID plate is attached: _____

OBVIOUS WATER QUALITY CHARACTERISTICS	WELL CLOSURE INFORMATION
<input type="checkbox"/> Fresh <input type="checkbox"/> Salty <input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Sediment <input type="checkbox"/> Gas Colour / Odour: _____ Water sample collected: <input type="checkbox"/>	Reason for closure: _____ Method of closure: <input type="checkbox"/> Poured <input type="checkbox"/> Pumped Sealant Material: _____ Backfill material: _____ Details of closure: _____

WELL DRILLER (print clearly)

Name (first, last): Darin Mac Donald

Consultant (if applicable; name & company): _____

Signature of Driller Responsible: _____

DATE OF WORK (yyyy/mm/dd)

Started: July 9/20 Completed: July 11/20

Comments: _____

PLEASE NOTE: The information recorded in this well report describes the works and hydrogeologic conditions at the time of construction, alteration or closure as the case may be. Well yield, well performance and water quality are not guaranteed as they are influenced by a number of factors, including natural variability, human activities and condition of the works, which may change over time.