

Owner name: _____

Mailing address: _____ City / Town: Whitehorse Prov. / Terr. Y.T. Postal Code _____

Well Location Address: Street No. 172 Street name War Eagle Way City / Town Raven's Ridge

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

OR PID: _____ AND Description of well location (attach sketch if nec.): Approx 50' to right of house mid way down

NAD 83: Zone: _____ AND UTM Easting: 08492523E m OR Latitude: _____ RECEIVED
 UTM Northing: 6733939N m OR Longitude: _____

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

Orientation of well: vertical horizontal Ground elevation 781 ft (asl) Method: DEC 15 2020

Class of well: _____

Water supply wells, indicate water use: private domestic water supply system irrigation commercial or industrial other (specify) _____

From ft (bgl)		To ft (bgl)		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)
				Clay	Silt	TM	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				
6	16																																							gravel rock decomposed BR
16	23																																							
23	225																																							
225	230																																							
780	300																																						19pm	
358	1.0																																					24pm		

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	30	6 3/8	Steel	2.9	P.R.						

Surface seal: Type Barlante 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 18 ft (bgl) To 358 ft (bgl)
 Perforated: From 312 ft (bgl) To 358 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 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>358</u> ft Finished well depth: <u>358</u> ft (bgl) Final stick up: <u>18</u> in Depth to bedrock: _____ ft (bgl) SWL: <u>142</u> ft (bgl) Estimated well yield <u>2</u> USgpm Artesian flow: _____ USgpm, or Artesian pressure: _____ ft Type of well cap: <u>Locking</u> Well disinfected: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Where well ID plate is attached: _____
WELL YIELD ESTIMATED BY	WELL CLOSURE INFORMATION
<input type="checkbox"/> Pumping <input type="checkbox"/> Air lifting <input type="checkbox"/> Bailing <input type="checkbox"/> Other (specify): _____ Rate: _____ USgpm Duration: _____ hrs SWL before test: _____ ft (btoc) Pumping water level: _____ ft (btoc)	Reason for closure: _____ Method of closure: <input type="checkbox"/> Poured <input type="checkbox"/> Pumped Sealant Material: _____ Backfill material: _____ Details of closure: _____
OBVIOUS WATER QUALITY CHARACTERISTICS	DATE OF WORK (yyyy/mm/dd)
<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"/>	Started: <u>Sept 6/20</u> Completed <u>Sept 9/20</u> Comments: _____
WELL DRILLER (print clearly)	
Name (first, last): _____ Consultant (if applicable; name & company): _____	
Signature of Driller Responsible: _____	

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.