



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

WATER WELL DRILLERS FORM

Well Record Page 1 of 2

Well ID:

To be assigned by Dept. Of Environment

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: First Name Last Name Company / Department / Organization

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 / ft ASL

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)

EXAMPLE ONLY

(brown, grey, green, black, redish, beige, olive, yellowish)

CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK

"trace" < 10% (i.e. SILT trace gravel)
 "some" 10-20% (i.e. SAND some gravel)
 "silty / sandy / gravelly" 20-30% (i.e. silty SAND)
 "and sand" or "and gravel" 35-50%

MOISTURE: dry / moist / saturated (wet)
HARDNESS: soft / hard / very hard

Depth (m / ft)		B4 General Colour	B5 Most Common Material	B6 Secondary Materials	B7 General Description
B2 From	B3 To				
0'	28'	Brown	Sand + Gravel		Dry
28'	34"	Grey	Coarse Gravel		Dry
34'	34'	Grey	Sand		Dry
34'	39'	Grey	fine sand		Wet
39'	70'	Grey	fine sand		Dry
70'	75'	Grey	Coarse sand		Dry
75'	80'	Grey	Clay		Dry
80'	91'	Grey	Clay		Dry
91'	163'	Silty	Coarse Sand	Sand	Water
163'	163.6'		Coarse Gravel + Water		Water

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

WELL CONSTRUCTION (Continues on Page 2)

Date Well Completed

Example: 31 01 2005

- C1 Drilling Method Air-Rotary (Conventional) Dug Reverse Air Rotary Cable Tool Other (please specify)
- 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 (cm / in)

C6 Casing Depth to: (m / ft)

C7 Other Comments Regarding Casing:

WELL CONSTRUCTION (Continued from Page 1)

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

C8 Seal Material Type: None (i.e. Bentonite)
 C9 Diameter of Seal: _____ (cm / in)
 C10 Seal Depth from: _____ (m / ft)
 C11 Seal Depth to: _____ (m / ft)
 C12 Volume Placed: _____ (m³ / ft³)

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 / in.)
 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 / ft)
 C18 Depth to: _____ (m / ft)
 Slot Size / Perforation Dia: _____ Thou. / mm / inches
 Screen 1: _____ (m / ft) _____ (m / ft) _____ Thou. / mm / inches
 Screen 2: _____ (m / ft) _____ (m / ft) _____ Thou. / mm / inches
 Screen 3: _____ (m / ft) _____ (m / ft) _____ Thou. / mm / inches
 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): 16" (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: 75 gph (Lps. / gpm)
 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
 D7 Well Abandonment Status: Was the well properly decommissioned with bentonite grout? YES NO If YES, indicate Date: _____
 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: 19 10 17 21 00 5
 Static Water Level (SWL): 63' (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: 155' (m / ft)
 Recomm. Pumping Rate: 5 gph (Lps. / gpm)
 If flowing, provide rate: 75 gph (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: _____
 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: bleach

Bacteria Testing

Was a sample taken? YES NO
 Date Sample Taken: _____
 If yes, indicate the name of the laboratory: Whse Hospital

Chemical Analysis of Water

Was a sample taken? YES NO
 Date Sample Taken: _____
 If yes, indicate the name of the laboratory: OPTERA

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company: 13634 Yukon Inc
 H2 Name of Driller(s): Roger Pople
 H3 Address of Driller: Box 10141 White Yukon
 Signature of Primary Driller: _____
 Date Submitted to Dept. Of Environment: _____

CONSULTANT (If applicable)

I-1 Company Name: _____
 I-2 Company Address: _____
 I-3 Report Reference: _____
 I-4 Report Date: _____

ADDITIONAL INSTRUCTIONS

Upon completing this form, please mail or fax it to:

Water Resources Section (V-310), 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