

**WATER WELL DRILLERS FORM**

Well Record Page 1 of 2

Well ID:

To be assigned by Dept. Of Environment

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

**INSTRUCTIONS FOR COMPLETING THE FORM**

1. Additional information is provided at the bottom of this form on page 2.
2. Question can be directed to Water Resources at 867 667-3171.

3. All well construction measurements shall be reported to 0.1 m or 0.3 ft.
4. Please print clearly in blue or black ink.
5. Completion and submission of this form is the responsibility of the drilling contractor.
6. 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:   Company / Department / Organization

A3 Street Address of Well Location:

A4 Town / Village / Area / Lot #:

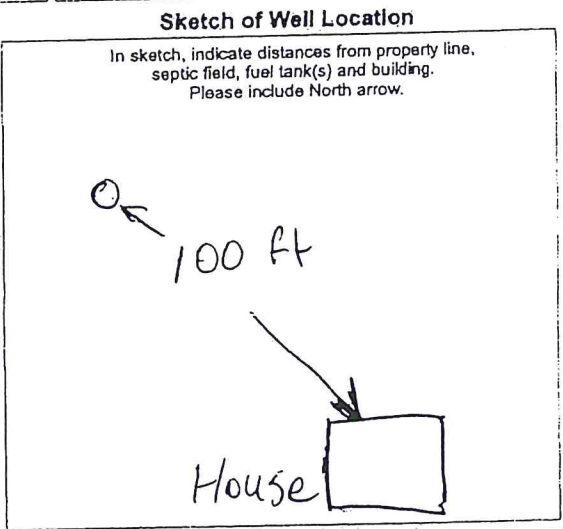
A5 UTM Coordinates (using handheld GPS): NAD   Zone:

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



**LOG OF OVERBURDEN AND BEDROCK MATERIALS** (All depths are below ground surface; circle appropriate units; use descriptors provided)

Depth (m / ft)	B4 General Colour	B5 Most Common Material	B6 Secondary Materials		B7 General Description
			trace gravel	some silt	
0 - 16	Brown	Coarse Gravel			Consolidated
16 - 36	Brown	Gravel			Soft
36 - 48	Brown	Sand			Soft
48 - 54	Grey	Sand			Soft
54 - 102	Brown	Sand		Gravel + Big Rock	Soft
102 - 119	Brown	Sand		Gravel	Hard
119 - 177	Brown	Sand		Gravel	Consolidated
177 - 204	Grey	Glacial Till		clay gravel	Hard
204 - 315	Grey	Basalt		Granite	Open Hole

B8 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     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

C3 Outside Diameter:  ( m / in )

C4 Casing Material:  Steel     Plastic     Other

C5 Casing Wall Thickness:  ( m / 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: Clay  
(i.e. Bentonite)

C9 Diameter of Seal: 10 (cm / in)

C10 Seal Depth from: 1-5 (m / ft)

C11 Seal Depth to: 11-5 (m / ft)

C12 Volume Placed: 30 (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 / 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) Biot 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)

1-5 (m / ft)  
(Use negative if below grade)

D4 Static Water Level (below top of casing)

182 (m / ft)  
(Use negative if below grade)

D5 Well Yield Estimate 0.25 (Lps / gpm)

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)

D6 Final Well Status

- Water Supply (in use)
- Stand-by (Back-up)
- Observation
- Not in use
- Deepened
- Other: \_\_\_\_\_
- Abandoned only
- Poor Quality
- Insufficient Yield

**PUMPING TEST RECORD AND GROUNDWATER QUALITY**  
(All depths below ground, circle appropriate units)

E1 Pumping Test Information

Pumping Test Start Date: 01/08/2007

Static Water Level (SWL): 182 (m / ft)

Pump Intake Set at: 10 (cm / ft)

Duration of pumping: \_\_\_\_\_ hrs 45 min

Final Water Level (FWL) at end of Pumping Test: 304 (m / ft)

**RECOMMENDATIONS**

Recomm. Pump Depth: \_\_\_\_\_ (m / ft)

Recomm. Pumping Rate: 5 (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: \_\_\_\_\_  
Electrical Conductivity: \_\_\_\_\_ uS  
pH: \_\_\_\_\_  
Temperature: \_\_\_\_\_ °C

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:

Chlorine

Bacteria Testing

Was a sample taken?  YES  NO

Date Sample Taken: 2/21/07

If yes, indicate the name of the laboratory:

Whitehorse Hospital

Chemical Analysis of Water

Was a sample taken?  YES  NO

Date Sample Taken: \_\_\_\_\_

If yes, indicate the name of the laboratory:

Analytical Chemical Systems

**WELL CONTRACTOR**

H1 Name of Contractor / Drilling Company: 13634 Yukon Inc

H2 Name of Driller(s): Roger Poole

H3 Address of Driller: Box 10461 Whitehorse Y1A 7A7

Signature of Primary Driller: \_\_\_\_\_

Date Submitted to Dept. Of Environment: 2/21/07

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 2C8

Please feel free to contact us at:

Phone: (867)-867-3171, Toll free (in Yukon): (1-800)-661-0408, local 3171  
Fax: (867)-867-3105