



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

C6 Seal Material Type: C9 Diameter of Seal: C10 Seal Depth from: C11 Seal Depth to: C12 Volume Placed:

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

C3 Gravel Pack: YES/NO, indicate diameter of material, Material type:

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

C14 Outside Diameter, C15 Screen Material, C16 Screen Type, C17 Depth from, C18 Depth to, Slot Size / Perforation Dia, C19 Screen Comments

WELL DEVELOPMENT AND STATUS

D1 Well Developed by, D2 Well Head Completion, D3 Well Head Stick-up, D4 Static Water Level, D5 Well Yield Estimate, D6 Final Well Status, D7 Well Abandonment Status, D8 Method Used to Estimate Well Yield

PUMPING TEST RECORD AND GROUNDWATER QUALITY

(All depths below ground, circle appropriate units)

E4 Pumping Test Information: Pumping Test Start Date, Static Water Level (SWL), Pump Intake Set at, Duration of pumping, Final Water Level (FWL) at end of Pumping Test

RECOMMENDATIONS

Recomm. Pump Depth, Recomm. Pumping Rate, If flowing, provide rate

F1 Well Water Level Drawdown/Recovery DATA

Table with columns for Drawdown (Time, Water Level) and Recovery (Time, Water Level)

G1 GROUNDWATER QUALITY

Field Data: Date Measurements Taken, Electrical Conductivity, pH, Temperature

Turbidity/Sand Content: Clear, Slightly turbid/cloudy, Moderately turbid/cloudy, Turbid/cloudy, Trace sand present, No sand present

Groundwater Type: Sulfy, Sulphur / Egg Odour, Organic Taste / Odour, Metallic Taste, Other

Well Disinfection: Was the well disinfected upon completion of the pump installation? Briefly describe method of well disinfection

Bacteria Testing: Was a sample taken? YES/NO, Date Sample Taken, If yes, indicate the name of the laboratory

Chemical Analysis of Water: Was a sample taken? YES/NO, Date Sample Taken, If yes, indicate the name of the laboratory

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company, H2 Name of Driller(s), H3 Address of Driller

CONSULTANT (if applicable)

I1 Company Name, I2 Company Address, I3 Report Reference, I4 Report Date

Signature of Primary Driller, Date Submitted to Dept. Of Environment

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) 667-3171, Toll free (in Yukon) (1-800) 651-0400, local 6174, Fax: (867) 657-3185, E-mail: Water.Resources@gov.yk.ca