



Government
Department of Environment
Water Resources Section V-310
Yukon Water Well Registry
Box 2703 Whitehorse, Yukon Y1A 2C6

Well ID:

To be assigned by Dept. Of Environment

WATER WELL DRILLERS FORM

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: First Name Last Name Company / Department / Organization

A3 Street Address of Well Location:

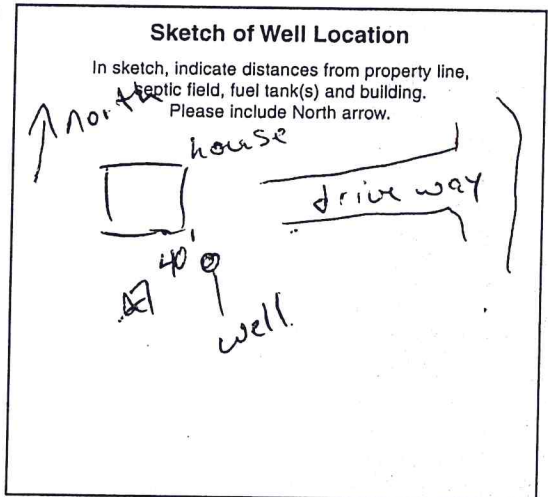
A4 Town / Village / Area / Lot #:

A5 UTM Coordinates (using handheld GPS): NAD Zone

Easting Northing

A6 Elevation of Top of Casing: m ASL

A7 Accuracy of GPS: +/- m / ft



A8 Purpose of Wells

- Domestic
- Commercial
- Industrial
- Test Well
- Municipal
- Agricultural
- Irrigation
- Observation - Water Level
- Public/Recreational
- Environmental (Quality)
- Other (please identify use)

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

EXAMPLE ONLY	Depth (m/ft) B2 From B3 To	B4 General Colour <small>(brown, grey, green, black, redish, beige, olive, yellowish)</small>	B5 Most Common Material <small>CLAY, SILT, SAND, GRAVEL, COBBLES, BOULDERS, BEDROCK</small>	MOISTURE: dry / moist / saturated (wet) HARDNESS: soft / hard / very hard	
				trace gravel <small>"trace" <10% (i.e. SILT trace gravel)</small>	some silt <small>"some" 10-20% (i.e. SAND some gravel)</small>
	0 6	brown	sand	trace gravel	
	6 7	brown	rocks	some silt	
	7 12	brown	sand		
	12 50	grey	silt	trace gravel	very hard
	50 54	orange	sand	some silt	
	54 60	orange	sand + silt	trace gravel	looser
	60 66	orangish	gravel	some silt	water bearing

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

WELL CONSTRUCTION (Continues on Page 2)

Date Well Completed
Y Y Y Y M M D D

Example: 2005 01 31

1 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

Casing (depth below ground surface, please circle appropriate units)

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:

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

C8 Seal Material Type: Bentonite (i.e. Bentonite)
 C9 Diameter of Seal: 8 (cm / in)
 C10 Seal Depth from: 10-99 (m / ft)
 C11 Seal Depth to: 17 (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): 5
 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: Screen 1. 65'8" (m / ft) Screen 2. _____ (m / ft) Screen 3. _____ (m / ft)
 C18 Depth to: Screen 1. 62'8" (m / ft) Screen 2. _____ (m / ft) Screen 3. _____ (m / ft)
 Slot Size / Perforation Dia: Screen 1. 18 (Thou. / mm / inches) Screen 2. _____ (Thou. / mm / inches) Screen 3. _____ (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): 2 (m / ft) (Use negative if below grade)
 D4 Static Water Level (below top of casing): 60 (m / ft) (Use negative if below grade)
 D5 Well Yield Estimate: 2 (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 Artesian conditions
 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: _____
 Y Y Y Y M M D D

Static Water Level (SWL): _____ (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: 66 (m / ft)
 Recomm. Pumping Rate: 2 (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: _____
 Y Y Y Y M M D D

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.

Bacteria Testing

Was a sample taken? YES NO If yes, indicate the name of the laboratory.

Date Sample Taken: 20070527 ALS
 Y Y Y Y M M D D

Chemical Analysis of Water

Was a sample taken? YES NO If yes, indicate the name of the laboratory.

Date Sample Taken: 20070527 ALS
 Y Y Y Y M M D D

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company: Pathway Water Resources
 H2 Name of Driller(s): Ron Toews
 H3 Address of Driller: 302 210 48 Whitehorse

 Signature of Primary Driller

CONSULTANT (If applicable)

I 1 Company Name: _____
 I 2 Company Address: _____
 I 3 Report Reference: _____
 I 4 Report Date: _____
 Y Y Y Y M M D D

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

Personal information contained on this form is collected under the authority of the Access to Information and Protection of Privacy (ATIPPA) Act, Section 29 (c) and will be used to compile a public database of well and ground water information. For further information contact the Manager of Hydrology, Water Resources at (867) 667-3223, toll free within Yukon 1-800-661-0408 Ext 3223.

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

I have read the above clause and understand the purpose for collection of personal information.

Signature of Well Owner