



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

C8 Seal Material Type: Bentonite (i.e. Bentonite)  
 C9 Diameter of Seal: 10 (cm)  
 C10 Seal Depth from: 0 (m)  
 C11 Seal Depth to: 60 (m)  
 C12 Volume Placed: \_\_\_\_\_ (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: 6 (cm)  
 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: 291 (m / ft)  
 C18 Depth to: 296.5 (m / ft)  
 Slot Size / Perforation Dia: 10 (mm / inches)  
 Screen 1: \_\_\_\_\_ (m / ft) \_\_\_\_\_ (m / ft) \_\_\_\_\_ (mm / inches)  
 Screen 2: 295.5 (m / ft) 296 (m / ft) 10 (mm / inches)  
 Screen 3: \_\_\_\_\_ (m / ft) \_\_\_\_\_ (m / ft) \_\_\_\_\_ (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  Well Pit (NOT PERMITTED)  None (well not completed)  
 D3 Well Head Stick-up (above ground surface): 7 (m / ft)  
 D4 Static Water Level (below top of casing): 80 (m / ft)  
 D5 Well Yield Estimate: 3 (Lps / gpm)  
 D6 Final Well Status:  Water Supply (in use)  Stand by (Back-up)  Observation  Not in use  Deepened  Other: \_\_\_\_\_  
 D7 Well Abandonment Status: Was the well properly decommissioned with bentonite grout?  YES  NO  
 D8 Method Used to Estimate Well Yield:  Air Lifting  Bailing  Pumping Test  
 If YES, Indicate Date: \_\_\_\_\_  
 Y Y Y Y M M D D

**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)

**G1 GROUNDWATER QUALITY**

Field Data  
 Date Measurements Taken: \_\_\_\_\_  
 Y Y Y Y M M D D

Electrical Conductivity: \_\_\_\_\_ uS  
 pH: \_\_\_\_\_  
 Temperature: \_\_\_\_\_ °C

**Groundwater Type**

Salty  
 Sulphur / Egg Odour  
 Organic Taste / Odour  
 Metallic Taste  
 Other: \_\_\_\_\_

**RECOMMENDATIONS**

Recomm. Pump Depth: \_\_\_\_\_ (m / ft)  
 Recomm. Pumping Rate: \_\_\_\_\_ (Lps / gpm)  
 If flowing, provide rate: \_\_\_\_\_ (Lps / gpm)

**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: \_\_\_\_\_

**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	

**Bacteria Testing**

Was a sample taken?  YES  NO If yes, indicate the name of the laboratory.  
 Date Sample Taken: \_\_\_\_\_  
 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: \_\_\_\_\_  
 Y Y Y Y M M D D

**WELL CONTRACTOR**

H1 Name of Contractor / Drilling Company: Cathway Water Cos.  
 H2 Name of Driller(s): Jordan / Tony  
 H3 Address of Driller: 1018 Copper Rd.  
 \_\_\_\_\_  
 Signature of Primary Driller  
 Y Y Y Y M M D D  
 Date Submitted to Dept. Of Environment

**CONSULTANT (if applicable)**

I1 Company Name: \_\_\_\_\_  
 I2 Company Address: \_\_\_\_\_  
 I3 Report Reference: \_\_\_\_\_  
 I4 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  
 Please feel free to contact us at:  
 Phone: (867) 667-3171, Toll free (in Yukon), (1-800) 561-0408, local 3171  
 Fax: (867) 667-3195 E-mail: Water.Resources@gov.yk.ca

Personal information contained on this form is collected under the authority of the Access to Information and Protection of Privacy (ATIP) 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.  
 I have read the above clause and understand the purpose for collection of personal information.  
 \_\_\_\_\_  
 Signature of Well Owner