



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

C8 Seal Material Type: Bentonite
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)

C13 Gravel Pack: NO/YES
Indicated depth (m/ft):
Indicate diameter of material:
Material type:

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

C14 Outside Diameter:
C15 Screen Material: Stainless Steel, Steel, Plastic, N/A, Other
C16 Screen Type: Continuous Wire Wrap, Lower Screen, Perforated, Slotted, Open Hole
C17 Depth from:
C18 Depth to:
Slot Size / Perforation Dia:
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, None
D3 Well Head Stick-up:
D4 Static Water Level:
D5 Well Yield Estimate:
D6 Final Well Status: Water Supply, Stand by, Observation, Not in use, Deepened, Other
D7 Well Abandonment Status:
D8 Method Used to Estimate Well Yield: Air Lifting, Bailing, Pumping Test

PUMPING TEST RECORD AND GROUNDWATER QUALITY

(All depths below ground, circle appropriate units)

E1 Pumping Test Information

Pumping Test Start Date:
YYYYMMDD

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:
YYYYMMDD

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

Table with columns: Drawdown Time (min), Water Level (m/R), Recovery Time (min), Water Level (m/R). Rows 0-60.

Bacteria Testing

Was a sample taken? YES/NO
Date Sample Taken:
YYYYMMDD

Chemical Analysis of Water

Was a sample taken? YES/NO
Date Sample Taken:
YYYYMMDD

Clear Form

Print Form

WELL CONTRACTOR

H1 Name of Contractor / Drilling Company: CATHWAY WATER
H2 Name of Driller(s): Grant Booth
H3 Address of Driller: 1018 Cadmus Rd. Whitehorse, YT
Signature of Primary Driller:
YYYYMMDD

CONSULTANT (if applicable)

I1 Company Name:
I2 Company Address:
I3 Report Reference:
I4 Report Date:
YYYYMMDD

ADDITIONAL INSTRUCTIONS

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

Please feel free to contact us at:
Phone: (867) 667-3171, Toll free (in Yukon): (1-800) 861-0408, local 3171
Fax: (867) 667-3195 E-mail: Water.Resources@gov.yk.ca

Water Resources Section (V-310),
Department of Environment,
Government of Yukon Box 2703,
Whitehorse, Yukon, Canada Y1A 2C6

Personal information 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.

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

Signature of Well Owner