WELL FORM Impact Drilling 867-668-6943

W18

sheet ____ of ____

6" - 12" • Water Wells • Pump Installation • Exploration • Dual Rotary Air Rig • Pilings

Owner name: [redacted]

Mailing address: _____ City / Town: _____ Prov. / Terr. YT Postal Code _____

Well Location Address: Street No. #5 Street name Grayling RL City / Town Cowley Creek

OR Legal description: Lot _____ Plan _____ D.L. _____ Block _____

OR PID: _____ **AND Description of well location** (attach sketch if nec.): To Left of house Approx 40'

NAD 83: Zone: _____ **AND UTM Easting:** 0591665 m **UTM Northing:** 6663926 m **OR Latitude:** _____ **Longitude:** _____

Method of drilling: ☐ air rotary ☑ dual rotary ☐ cable tool ☐ mud rotary ☐ auger ☐ driving ☐ jetting ☐ other (specify) _____

Orientation of well: ☑ vertical ☐ horizontal Ground elevation _____ ft (asl) Method: _____

Class of well: _____

Water supply wells, indicate water use: ☑ private domestic ☐ water supply system ☐ irrigation ☐ commercial or industrial ☐ other (specify) _____

LITHOLOGIC DESCRIPTION

From ft (bgl)	To ft (bgl)	Surficial Material: Clay	Silt	Till	Sand with clay/silt	Sand, fine-med	Sand, med-coarse	Sand with gravel	Bedrock Material: Siltstone/Shale	Sandstone	Granodiorite	Limestone	Basalt	Volcanic	Crystalline	Other Surficial Bedrock	Color: Red	Orange	Brown	Black	Light Grey	Blue	Green	Dark Grey	Hardness: Very Hard	Hard	Dense / Stiff	Loose	Water Content: Dry	Moist	Wet	High Production	Lost circulation	Not available	Observations (e.g. other geological materials (e.g. boulders), est. water bearing flow (USgpm), or closure details)
0	70	○	○	○	●	○	○	○	○	○	○	○	○	○	○	○	○	○	●	○	○	○	○	○	○	○	○	●	●	○	○	○	○	○	
70	102	○	●	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	●	○	○	○	○	○	○	○	●	●	○	○	○	○	
102	105	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	●	○	○	gravel decomposed bedrock
		○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	
105		⊗	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	water would not clean up
		○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	
105	120	●	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	●	○	○	○	○	○	○	○	●	○	○	○	○	○	
120	190	○	○	○	○	○	○	○	○	○	○	○	●	○	○	○	○	○	○	●	○	○	○	○	○	○	○	○	○	○	○	●	○	○	
		○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	
		○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	

CASING DETAILS

From ft (bgl)	To ft (bgl)	Dia in	Casing Material / Open Hole	Wall Thickness in	Drive Shoe
0	120	6⅝	Steel	.219	D.R

Surface seal: Type Bentonite Depth 15 ft
Method of installation ☑ Poured ☐ Pumped Thickness 10 in
Backfill: Type _____ Depth _____ ft
Liner: ☐ PVC ☑ Other (specify): _____
Diameter 4.5 in Thickness .250 in
From 10 ft (bgl) To 190 ft (bgl)
Perforated: From _____ ft (bgl) To _____ ft (bgl)

SCREEN DETAILS

From ft (bgl)	To ft (bgl)	Dia in	Type	Slot Size

Intake: ☐ Screen ☐ Open bottom ☐ Uncased hole
Screen type: ☐ Telescope ☐ Pipe size
Screen material: ☐ Stainless steel ☐ Plastic ☐ Other: _____
Screen opening: ☐ Continuous slot ☐ Slotted ☐ Perforated pipe
Screen bottom: ☐ Bail ☐ Plug ☐ Plate ☐ Other: _____
Filter pack: From _____ ft To: _____ ft Thickness: _____ in
Type and size of material: _____

DEVELOPED BY

☑ Air lifting ☐ Surging ☐ Jetting ☐ Pumping ☐ Bailing
Other (specify): _____ Total duration: _____ hrs
Notes: _____

WELL YIELD ESTIMATED BY

☐ Pumping ☑ Air lifting ☐ Bailing ☐ Other (specify): _____
Rate: _____ USgpm Durtation: _____ hrs
SWL before test: _____ ft (btoc) Pumping water level: _____ ft (btoc)

OBVIOUS WATER QUALITY CHARACTERISTICS

☐ Fresh ☐ Salty ☑ Clear ☐ Cloudy ☐ Sediment ☐ Gas
Colour / Odour: _____ Water sample collected: ☐

WELL DRILLER (print clearly)

Name (first, last): Brian MacDougall
Consultant (if applicable; name & company) _____

Signature of Driller Responsible B MacDougall

FINAL WELL COMPLETION DATA

Total depth drilled: 190 ft Finished well depth: 190 ft (bgl)
Final stick up: 18 in Depth to bedrock : 120 ft (bgl)
SWL: 47.6 ft (bgl) Estimated well yield 10 USgpm
Artesian flow: _____ USgpm, or Artesian pressure: _____ ft
Type of well cap: _____ Well disinfected: ☐ Yes ☐ No
Where well ID plate is attached: _____

WELL CLOSURE INFORMATION

Reason for closure: _____
Method of closure: ☐ Poured ☐ Pumped
Sealant Material: _____ Backfill material: _____
Details of closure: _____

DATE OF WORK (yyyy/mm/dd)

Started: Aug **Completed** Aug 2015
Comments: _____

PLEASE NOTE: The information recorded in this well report describes the works and hydrogeologic conditions at the time of construction, alteration or closure as the case may be. Well yield, well performance and water quality are not quaranteed as they are influenced by a number of factors, including natural variability, human activities and condition of the works, which may change over time.

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