

Address of Well Location (Street Number/Name) 1098 Hemlock Point Rd Township MEDORA Lot Pt 17 Concession 1 of 25-26  
 County/District/Municipality Muskoka City/Town/Village BALA Province Ontario Postal Code \_\_\_\_\_  
 UTM Coordinates Zone 18 Easting 0605697499 Northing 7340 Municipal Plan and Sublot Number \_\_\_\_\_ Other \_\_\_\_\_

**Overburden and Bedrock Materials/Abandonment Sealing Record** (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)	
				From	To
BLACK	TOPSOIL		LOOSE	0	2'
BROWN	SAND		FINE	2'	4'
BROWN	SAND	SILT	SOFT	4'	20'
GREY	CLAY		SOFT (VERY)	20	40'
GREY	SILT		SOFT	40'	47'
GREY	BOULDERS	SAND	HARD	47	64'6"
GREY	GRANITE		HARD	64'6"	120'

**Annular Space**

Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m³/ft³)
0 to 66'9"	Bentonite	

**Results of Well Yield Testing**

After test of well yield, water was:	Draw Down		Recovery	
	Time (min)	Water Level (m/ft)	Time (min)	Water Level (m/ft)
<input checked="" type="checkbox"/> Clear and sand free <input type="checkbox"/> Other, specify _____	Static Level	1.3		
If pumping discontinued, give reason:	1		1	
Pump intake set at (m/ft) <u>100'</u>	2		2	
Pumping rate (l/min / GPM) <u>12</u>	3		3	
Duration of pumping <u>1</u> hrs + _____ min	4		4	
Final water level end of pumping (m/ft) <u>80</u>	5		5	
If flowing give rate (l/min / GPM)	10		10	
	15		15	
	20		20	
Recommended pump depth (m/ft) <u>100'</u>	25		25	
Recommended pump rate (l/min / GPM) <u>12</u>	30		30	
Well production (l/min / GPM) <u>12</u>	40		40	
Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	50		50	
	60		60	

**Method of Construction**

<input type="checkbox"/> Cable Tool	<input type="checkbox"/> Diamond	<input type="checkbox"/> Public	<input type="checkbox"/> Commercial	<input type="checkbox"/> Not used
<input checked="" type="checkbox"/> Rotary (Conventional)	<input type="checkbox"/> Jetting	<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Municipal	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Rotary (Reverse)	<input type="checkbox"/> Driving	<input type="checkbox"/> Livestock	<input type="checkbox"/> Test Hole	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Boring	<input type="checkbox"/> Digging	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Cooling & Air Conditioning	
<input checked="" type="checkbox"/> Air percussion		<input type="checkbox"/> Industrial		
<input type="checkbox"/> Other, specify _____		<input type="checkbox"/> Other, specify _____		

**Construction Record - Casing**

Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		Status of Well
			From	To	
6"	Steel	.188	+2	66'9"	<input checked="" type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify _____ <input type="checkbox"/> Other, specify _____

**Construction Record - Screen**

Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

**Water Details**

Water found at Depth (m/ft)	Kind of Water: <input type="checkbox"/> Fresh <input type="checkbox"/> Untested
72 (m/ft)	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____
(m/ft)	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____
(m/ft)	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____

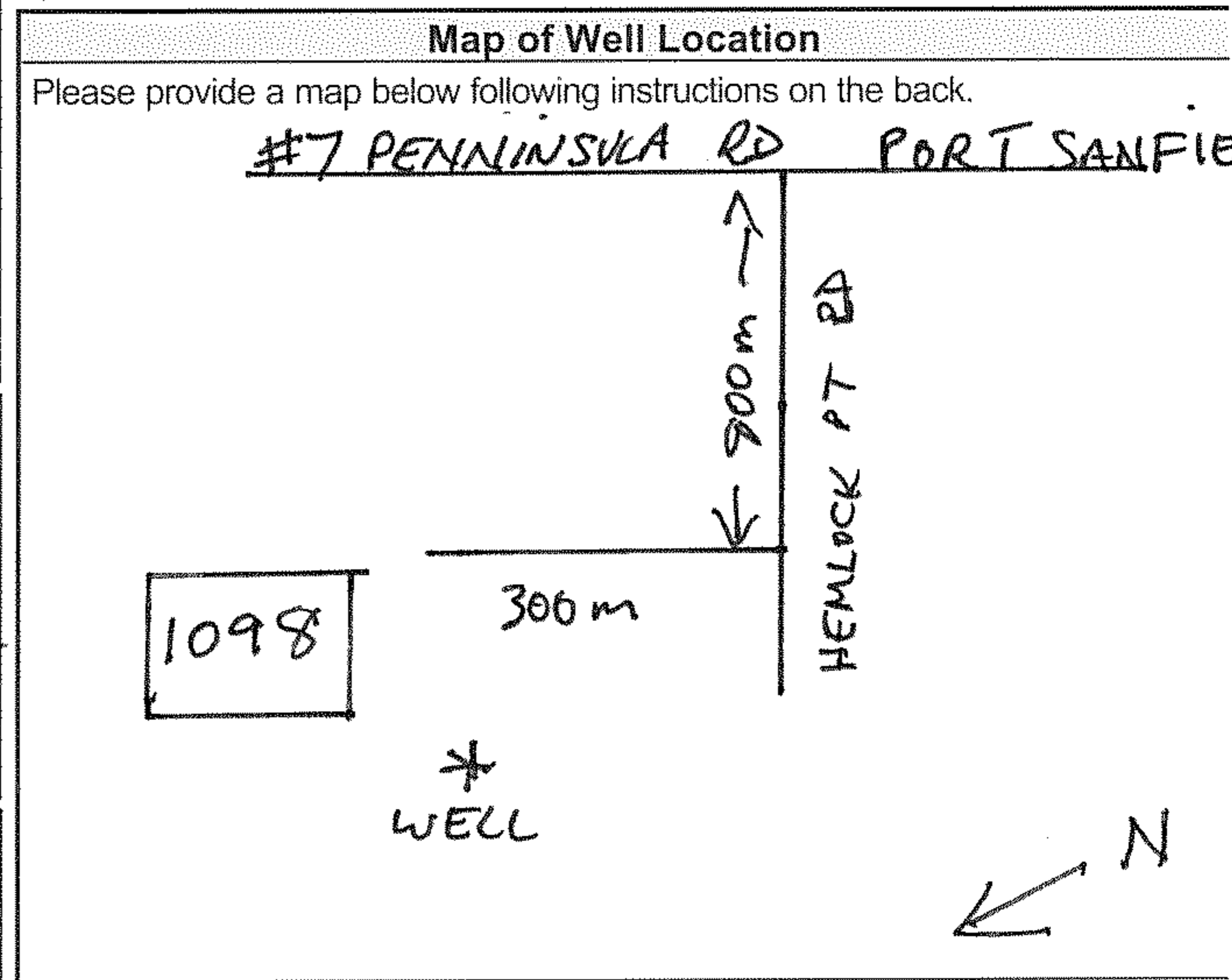
**Hole Diameter**

Depth (m/ft)	Diameter (cm/in)
0 to 66'9"	8 3/4
66'9" to 120	6 1/8

**Well Contractor and Well Technician Information**

Business Name of Well Contractor F.C. HAMMOND WELL DRILLING Well Contractor's Licence No. 2 5 5 0  
 Business Address (Street Number/Name) 121 LAGOON TRAINER PARK DR. Municipality Huntsville  
 Province Ont Postal Code P1H2J4 Business E-mail Address hamwell@vianet.on.ca

Bus. Telephone No. (inc. area code) 705 789 4361 Name of Well Technician (Last Name, First Name) Steko, Mike  
 Well Technician's Licence No. 2 4 5 8 Signature of Technician and/or Contractor [Signature] Date Submitted Y Y Y Y M M D D



Comments:

Well owner's information package delivered  Yes  No

Date Package Delivered 20150522

Date Work Completed 20150522

**Ministry Use Only**

Audit No. Z192170

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