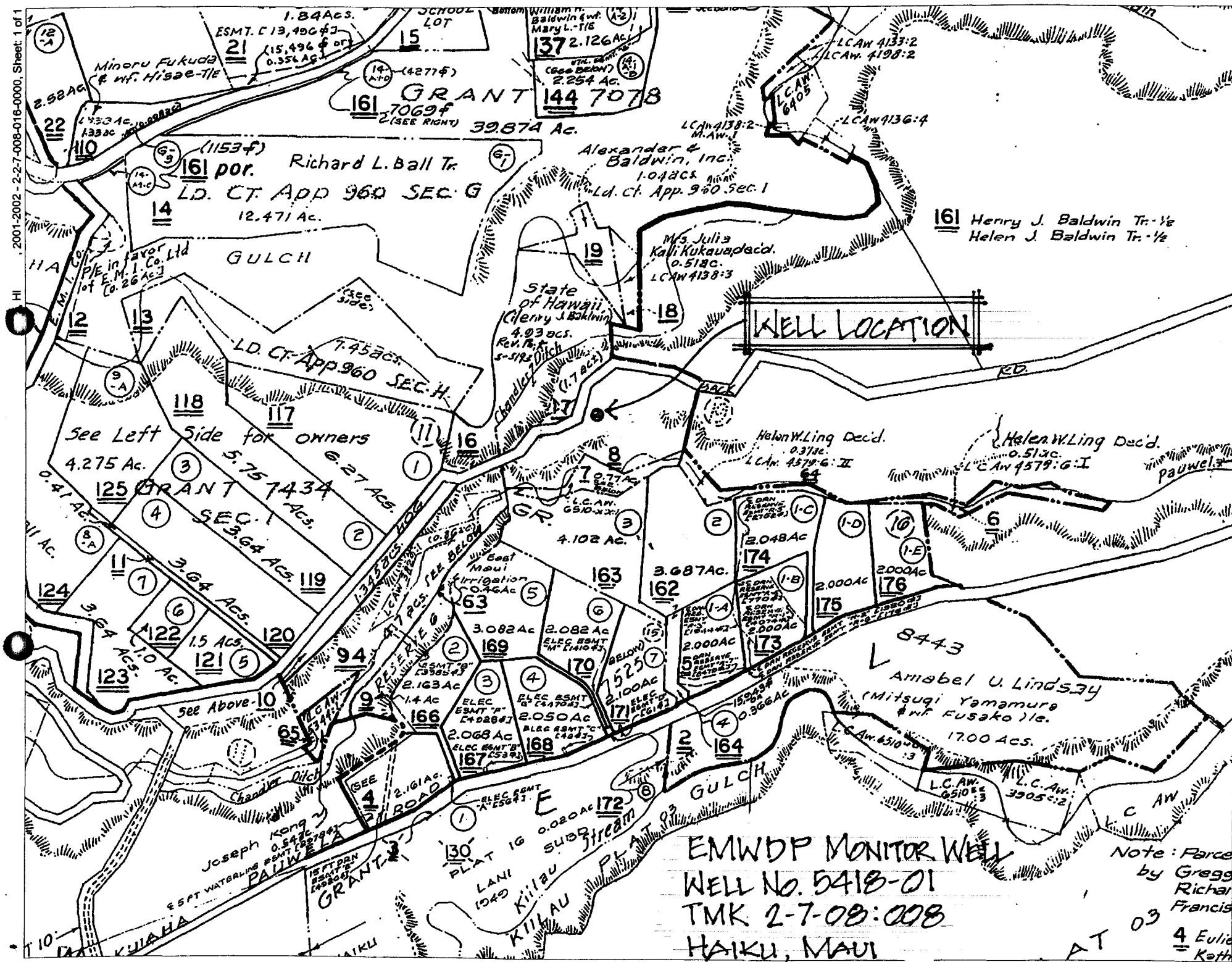


**EMWDP Monitor Well
(5418-01)**



BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII



GILBERT S. COLOMA-AGARAN
CHAIRPERSON

BRUCE S. ANDERSON
MEREDITH J. CHING
CLAYTON W. DELA CRUZ
BRIAN C. NISHIDA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

April 15, 2002

5418-01.wcr.acc.doc

Mr. David Craddick
County of Maui
Department of Water
200 South High Street
Wailuku, HI 96793

Dear Mr. Craddick:

Well Completion Report for Well No. 5418-01

We have received your Well Completion Report Part I for the East Maui Water Development Plan Monitor Well (Well No. 5418-01), and accept it as complete.

As noted in the special conditions for this well, an acceptably complete application for pump installation permit will require transmittal of:

1. Documentation of compliance with Chapter 343 (Special Condition #4).
2. A copy of the Governor's Executive Order setting aside the site for this purpose (Special Condition #4).

If you have any questions, please contact Charley Ice of the Commission staff a 587-0251 or toll-free at 984-2400, extension 70251.

Sincerely,

A handwritten signature in black ink, appearing to read "Linnel T. Nishioka".

LINNEL T. NISHIOKA
Deputy Director

CI:ss

Well Name: EMWDP Monitor Well No. 5418-01

Date of Test: January 19, 2002

Date of Analysis: 03-Apr-02

Alternative way for determining T from step-drawdown data (Mink, per. comm)

$Q = \text{ft}^3/\text{d}$ $Q1 \text{ (gpm)} = 705 = 135713 \text{ ft}^3/\text{d}$

$s = \text{ft.}$ $Q2 \text{ (gpm)} = 438 = 84315 \text{ ft}^3/\text{d}$

Set up two equations:

$$s1 = jQ1 + nQ1^2$$

$$s2 = jQ2 + nQ2^2$$

green = input

red = calculated

blue = equations

$$Q2 = 84315 \quad s2 = 0.69$$

$$Q1 = 135713 \quad s1 = 1.62$$

$$\text{Well Depth below sea level} = 65.9$$

$$\text{Radius of well (ft)} = 0.583 = r$$

$$n = s1 - (Q1/Q2)s2/Q1(Q1-Q2) = 7.3\text{E-}11$$

$$j = s/Q - nQ = 2\text{E-}06$$

Laminar flow equation:

$$s = jQ = 0.274998 \quad 16.98\% \text{ Head loss due to laminar flow}$$

Thiem Eq.

$$T = 1/2\pi j (\ln\{re/r\})$$

$$re = \text{Well Depth BSL} * 1.6 = 105.44$$

Therefore:

$$T = 1/2\pi j (\ln\{re/r\}) = 408246 \text{ ft}^2/\text{d} \quad /$$

MEMO and ROUTE SLIP

04/02/02

WCR 1 Check for Well No. 5418-01 (survey to regulation memo)

1. **Pump Tests Check** Glenn Bauer GB (initial) **Yes** **No** **If no, describe deficiency**

4/17/02

Step-Drawdown Test:

followed WCPI Stds ☒ ☐
analysis attached ☒ ☐
proposed pump cap o.k. ☐ ☐

promote well

Aquifer Pump Test:

followed WCPI Stds ☒ ☐
T & S analysis attached ☐ ☒

Well Interference:

estimated Steady-State
drawdown at 1-mile radius is minimal ft.
analysis attached ☐ ☐

Stream Surface Water Impacted: ☐ ☐ ← If yes, identify most probable stream

2. **Construction Check** Mitch Ohye MO (initial) **Yes** **No** **If no, describe deficiency**

data complete ☒ ☐
followed WCPI Stds ☒ ☐
well database updated ☒ ☐

4/5/02 4/17/02
W.D. B. 4/17/02
Future from 4/17/02 of course

3. **Charley/Lenore/Ryan** CR (initial) **take action based on above analysis**

ATTACHMENTS FOR PUMP INSTALLATION PERMIT:

- 1 COVER LETTER
- 2 PERMIT (2x)
- 3 DOH COMMENTS
- 4 LAND DIV. COMMENTS
- 5 WCR 2 FORM
- 6 WUR FORM

not necessary – only WCP.

To be sent to applicant



4. Roy RR (initial) check see comments, ci ✓
5. Subia SS (initial) finalize
6. Linnel LL (initial) signature
7. Charley/Lenore/Ryan File



DEPARTMENT OF WATER SUPPLY 02 MAR 28 10:19

COUNTY OF MAUI

P.O. BOX 1109

WAILUKU, MAUI, HAWAII 96793-6109

TELEPHONE (808) 270-7816 • FAX (808) 270-7833 • www.mauewater.org

March 21, 2002

Dept. of Land and Natural Resources
Commission on Water Resource Management
P. O. Box 621
Honolulu, Hawaii 96809

Gentlemen:

Subject: EAST MAUI WATER DEVELOPMENT PLAN MONITOR WELL
WELL NO. 5418-01, HAIKU, MAUI

Transmitting the following in accordance with the Well Construction Permit.

1. Well Completion Report - Part 1
2. Elevation Certification
3. As-built sectional drawing of the well
4. Location maps
5. Pump Test records for Step-Drawdown Test and Constant Rate Test

Should you have any questions, please contact our engineering division at 808-270-7835.

Sincerely,

David R. Craddick
Director

AM:sc

Enclosures: 5 as noted above

xc: Mink & Yuen w/out encl

Water Resources International w/out encl

"By Water All Things Find Life"

MAR 22 2002

Printed on recycled paper





State of Hawaii
COMMISSION ON WATER RESOURCE MANAGEMENT
Department of Land and Natural Resources
WELL COMPLETION REPORT - PART I
Well Construction

For Official Use Only:

RECEIVED

02 MAR 28 AIO : 19

CC: [illegible]
RIS: [illegible]

Instructions: Please print in ink or type and send completed report (with attachments, if applicable) to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. The Commission may not accept incomplete reports. This form shall be submitted within 60 days of the completion of work. For assistance, please consult the Hawaii Well Construction and Pump Installation Standards or call the Regulation Branch at 587-0225. For updates to this form or additional information, please visit our website at <http://www.state.hi.us/dlnr/cwrm/>

1. State Well No.: 5418-01 Well Name: EMWDP Monitor Well Island: Maui
Pauwela Gulch at 600 ft. el., Pauwela
2. Address: Homesteads, Makawao Tax Map Key: 2-7-8:8
3. Drilling Company: Water Resources International, Inc.
4. Drilling method used during construction: ☒ Rotary ☐ Percussion ☐ Other (describe)
5. Date Well Construction (drilled, cased, grouted) completed: 2/7/02 Fill out attached Driller's Log
month/day/year
In addition to the driller's log, if a geologic log was prepared, please submit with this form.
6. Was the subject well cored? ☒ Yes ☐ No
7. Initial water-level encountered 662.33 ft. below ground Date and time of measurement: 11/21/01 8:30 AM
month/day/year time
8. Step-Drawdown Test completed? ☐ No ☒ Yes Attach Step-Drawdown Test form (12/17/97 SDPTD Form)
9. Constant Rate Aquifer Test completed? ☐ No ☒ Yes Attach Constant Rate Aquifer Test form (12/17/97 CRPTD Form)
- Parameters prior to pump test:
10. Water-level: 4.68 ft. above msl Date and time of measurement: 1/19/02 11:45 AM
month/day/year time
11. Chloride: 50 ppm Date and time of sampling: 1/19/02 11:45 AM
month/day/year time
12. Temperature: 69.98 °F Date and time of measurement: 1/19/02 11:45 AM
month/day/year time
13. Fill in the as-built section on the other side of this sheet. See attached "As Built"
14. Fill in attached surveyor's report.
15. If a pump is not planned to be installed, please describe (below in the remarks section) how well is secured to prevent unauthorized access (example: lockable cover, threaded coupling, etc.)
16. The proposed manufacturer's rated pump capacity is na gpm at a head of na ft.
17. Remarks: Lockable cover *

Licensed Driller (print) Blaise Clay

C-57 Lic. No. AC-05058

Signature

Blaise Clay

Date March 8, 2002

Permittee (print)

David Craddock

Signature

David Craddock

Date



13. AS-BUILT WELL SECTION (Please attach as-built if different diagram provided below)

Elevation at top of casing 669.10 ft., msl*
(to nearest 0.01 ft.)

Hole Diameter: 30/21 1/2 in.

Minimum of 2' Radius & 4" Thick Concrete Pad

Ground Elevation: 667.10 ft., msl

Bench mark elevation:
667. ft., msl*
(Survey to nearest 0.01 ft.)

Cement Grout: * ft.
(min. 70% of distance from ground elevation to top of water surface or 500 ft., whichever is less.)

Annular space between hole and casing (min. 3"):
3 in.

Rock or Gravel Packing:
* ft.
Material:
☐ Crushed Basalt
☐ Rounded Gravel

Water Level Elevation:
4.68 ft. msl*

Total Depth
733 ft.

≥ 90% x (Ground Elev. - Water Level Elev)

Solid Casing: (≥ 90% x (Ground Elev. - Water Level Elev))
Length: 149 668 ft.
Nominal Diameter: 24" ID 14" ID in.
Wall Thickness: .375 .375 in.
Bottom Elevation: 518.10 -9 ft., msl

Open Casing: ☐ Perforated ☐ Screen
Length: 65 ft.
Nominal Diameter: 14" ID in.
Wall Thickness: 5/16 in.
Bottom Elevation: -65.90 ft., msl

Open Hole:
Length: -0- ft.
Diameter: _____ in.
Bottom Elevation: _____ ft., msl

*See as-built attached

*msl = mean sea level

Please refer to the
**HAWAII WELL CONSTRUCTION AND
PUMP INSTALLATION STANDARDS**
to ensure that your as-built is in compliance
with applicable standards.

6-9418-01 EMWDP Monitor

Solid Casing Material:

- Carbon Steel: compliant with (check one or more): ☐ ANSI/AWWA C200 ☐ API Spec. 5L ☐ ASTM A53 ☒ ASTM A139
And compliant with (check one or more): ☐ ASTM A242 ☒ Type E ☐ Type S ☒ Grade B ☐ Other
- Stainless Steel: (check one): ☐ ASTM A409 (production wells) ☐ ASTM A312 (monitor wells)
- ABS Plastic conforming to ASTM F480 and ASTM D1527: (check one) ☐ Schedule 40 ☐ Schedule 80
- PVC Plastic conforming to ASTM F480 and (ASTM D1785 or ASTM D2241): (check one): ☐ Schedule 40 ☐ Schedule 80 ☐ Schedule 120
- Thermoset Plastic: (check one) ☐ Filament Wound Resin Pipe conforming to ASTM D2996
☐ Centrifugally Cast Resin Pipe conforming to ASTM D2997
☐ Reinforced Plastic Mortar Pressure Pipe conforming to ASTM D3517
☐ Glass Fiber Reinforced Resin Pressure Pipe conforming to AWWA C950
☐ PTFE Fluorocarbon Tubing conforming to ASTM D3296
☐ FEP Fluorocarbon Tubing conforming to ASTM D3296

Open Casing Material:

- Carbon Steel: compliant with (check one or more): ☐ ANSI/AWWA C200 ☐ API Spec. 5L ☐ ASTM A53 ☒ ASTM A139
And compliant with (check one or more): ☐ ASTM A242 ☒ Type E ☐ Type S ☒ Grade B ☐ Other
- Stainless Steel: (check one): ☐ ASTM A409 (production wells) ☐ ASTM A312 (monitor wells)
- ABS Plastic conforming to ASTM F480 and ASTM D1527: (check one) ☐ Schedule 40 ☐ Schedule 80
- PVC Plastic conforming to ASTM F480 and (ASTM D1785 or ASTM D2241): (check one): ☐ Schedule 40 ☐ Schedule 80 ☐ Schedule 120
- Thermoset Plastic: (check one) ☐ Filament Wound Resin Pipe conforming to ASTM D2996
☐ Centrifugally Cast Resin Pipe conforming to ASTM D2997
☐ Reinforced Plastic Mortar Pressure Pipe conforming to ASTM D3517
☐ Glass Fiber Reinforced Resin Pressure Pipe conforming to AWWA C950
☐ PTFE Fluorocarbon Tubing conforming to ASTM D3296
☐ FEP Fluorocarbon Tubing conforming to ASTM D3296



33 Lono Avenue, Suite 400
Kalihiuli, Hawaii 96732-1608
P.O. Box 156
Kalihiuli, HI 96733-6656
www.abprop.com
Tel (808) 877-5523
Fax (808) 871-7497

March 8, 2002

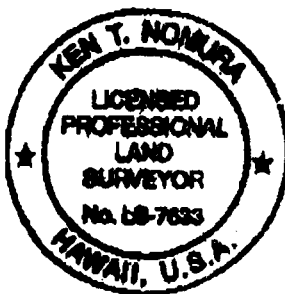
SURVEYOR'S CERTIFICATION

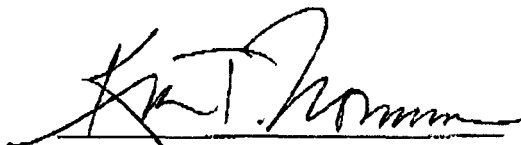
TO: WATER RESOURCES INTERNATIONAL, INC.

I hereby certify, to the best of my knowledge and ability, that on February 13, 2002, under the direction of the undersigned, a bench level survey was performed from an established control station whose elevation is based on a U.S.G.S Reference bench mark to the Haiku Monitor Well located on Tax Map Plat: (2) 2-7-08:8. Based on said bench level survey, the concrete pad at the base of well casing of the Haiku Monitor Well is 667.10 feet above Mean Sea Level.

A&B PROPERTIES, INC.

This work was prepared by me or
under my supervision.




Ken T. Nomura
Licensed Professional Land Surveyor
Certificate No. LS-7633

KTN:co

cc: Properties, Honolulu

6-5418-01 EMVBP MONITOR WELL



P-DRAWDOWN PUMP TEST DATA

(not required for wells producing < 100,000 gpd or 70 gpm)

Table 1 (SDPTD Form 12/17/97)

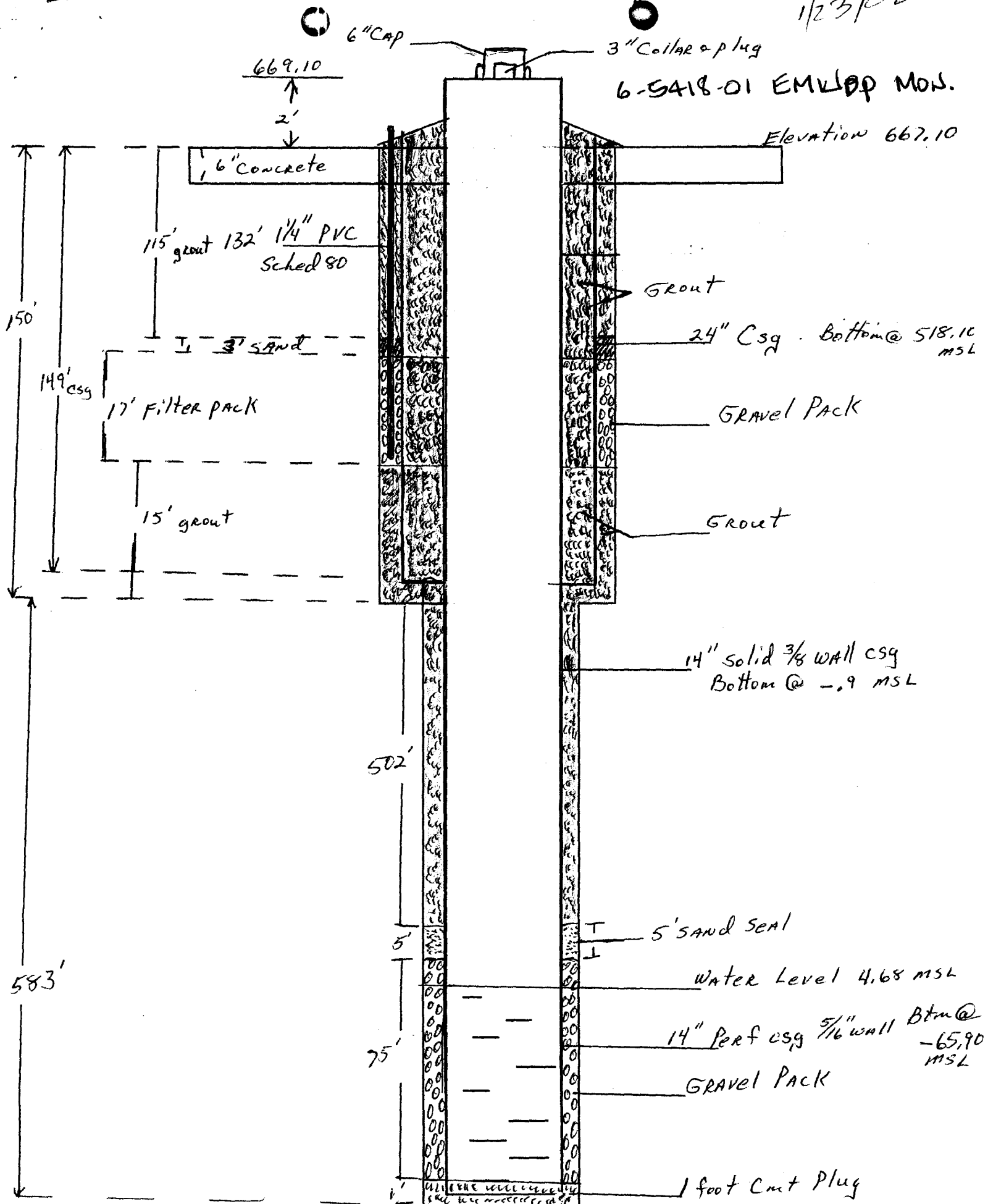
Pumped Well No. 54118-85 Observation well no. Eden @ GL, 667.15
Pumped Well Name 444110 MONITOR WELL Distance between Obs. & Pumped Well _____ ft.
Target Q 450, 550, 650, 750 gpm Reference pt. for depth to water 620.44 ft. msl (GL + 3.25)
Static Water Level @ start of test 662.51 ft. msl (4.68' Net)
Water level measurements by: ☐ steel tape ☐ pressure transducer ☒ airline static PSI 16.8
START TEST Date: 1/19/02 Time of day: 11:45 AM (solinst 665.76 @ Ref. Pt.)

Flow Meter Reading Start: 21106000 gals

Suggested Elapsed time t (min)	Actual Elapsed Time t (min)	Depth to water (nearest 0.1 ft)	Drawdown S (unadjusted to nearest 0.1 ft)	Pumping rate Q (at least 3 steps) (gpm)	EC (μmhos)	Cl (mg/l)	Temp. °F or °C	Data in this table is for: <input checked="" type="checkbox"/> Pumped Well <input type="checkbox"/> Observation Well Remarks
-45	-45	665.76		0			.	Start test/ Step 1
-30	-30	"		0			.	
-15	-15	"		0			.	
0	0	"					.	Start pump
1	1	666.68	<u>16.4 / .92</u>	850 RPM			.	
1.5							.	
2	2	665.88	<u>16.75 / .12</u>				.	
2.5							.	
3	3	665.88	<u>16.75 / .12</u>				.	
4	4	"	<u>16.75 / .12</u>				.	
5				900 RPM			.	
6	6	666.11	<u>16.65 / .35</u>				.	
7							.	
8	8	665.99	<u>16.7 / .23</u>	1000 RPM			.	
10	10	666.45	<u>16.5 / .69</u>	439			.	
15	15	"	<u>16.5 / .69</u>	441			.	
20	20	"	<u>16.5 / .69</u>	433			.	
25	25	"	<u>16.5 / .69</u>	439			.	
30 ²	30	"	<u>16.5 / .69</u>	447	234	<50 ³	21.1	Chloride sample taken
45	45	"	<u>16.5 / .69</u>	432			.	Step 2 begin?
step 46	46	666.68	<u>16.4 / .92</u>	552			.	
	50	"	<u>16.4 / .92</u>	541			.	
	55	"	<u>16.4 / .92</u>	541	257		20.1	
	60	"	<u>16.4 / .92</u>	550			.	
	75	"	<u>16.4 / .92</u>	550			.	

Table 1 (SDPTD Form 12/17/97)[illegible]

1/23/02



INSTANT-RATE PUMP TEST DATA

Table 2 (CRPTD Form 12/17/97)

Pumped Well No. 5498-05 Observation well no. _____
 Pumped Well Name BAKIDAWATE Distance between Obs. & Pumped Well _____ ft.
 Target Q 250 gpm Reference pt. for depth to water 620.44 ft. msl
 Static Water Level @ start of test 4.68 ft. msl

Water level measurements by: ☐ steel tape ☐ pressure transducer ☒ airline *set @ 665.76 8/Rel*

START TEST Date: 1/19/02 Time of day: 3:45
3:45 -34.13' MSL

Flow Meter Reading Start: 211245000 gals

Suggested elapsed time t (min)	Actual elapsed time t (min)	Depth to water F/Rs Pt (nearest 0.1 ft)	Drawdown Airline DD (unadjusted to nearest 0.1 ft)	Pumping rate Q (gpm)	EC (µmhos)	Cl ⁻ (mg/l)	Temp. ° F or ° C	Data in this table is for: <input type="checkbox"/> Pumped Well <input type="checkbox"/> Observation Well Remarks
-45		straight into Ext test from						Start Test
-30		Step test Per John Mink						
-15								
1/19/02 0	0		0.00			1	.	Start pump/Cl ⁻ taken
4:00 PM 1		667.38	16.1 16.2	751	262	250	19.6	
3:45 1.5		667.38					.	
2							.	
2.5							.	
3							.	
4							.	
5							.	
6							.	
7							.	
8							.	
10							.	
1/19 4:00 PM 15	15	667.61	16.0 16.1	770	263		19.6	
20							.	
25							.	
30							.	
40							.	
50							.	
60							.	
5:00 70	75	667.61	16.0 16.1	764	262		19.6	
80							.	
90							.	
6:00 100	135	667.38	16.1 16.2	755	265	50	19.4	
7:00 150	195	667.38	16.1 16.2	766			.	

Table 2 (CRPTD Form 12/17/97)

Suggested Elapsed time t (min)	Actual Elapsed Time t (min)	Depth to water (nearest 0.1 ft)	Drawdown S (unadjusted to nearest 0.1 ft)	Pumping rate Q (at least 3 steps) (gpm)	EC (μmhos)	Cl ⁻ (mg/l)	Temp. ____ °F or ____ °C	Data in this table is for: <input type="checkbox"/> Pumped Well <input type="checkbox"/> Observation Well Remarks
8:00	255	662.38	16.1 / 1.82	740			.	
9:00	315	"	16.1 / 1.82	768			.	
10:00	375	"	16.1 / 1.82	761			.	
11:00	435	"	16.1 / 1.82	750			.	
12:00 AM	495	667.38	16.1 / 1.82	753	267	50	19.9	
1:00	555	667.15	16.2 / 1.39	745			.	
2:00	615	667.15	16.2 / 1.39	750			.	
3:00	675	667.38	16.1 / 1.82	757	268	55	19.9	
4:00	735	"	16.1 / 1.62	748			.	
5:00	795	"	16.1 / 1.62	747			.	
6:00	855	"	16.1 / 1.62	750	267	55	19.9	
7:00	915	"	16.1 / 1.62	764			.	
8:00	975	"	16.1 / 1.62	764			.	
9:00	1035	"	16.1 / 1.62	765	276		1.	
10:00	1095	"	16.1 / 1.62	765			.	
11:00	1155	"	16.1 / 1.62	747			.	
12:00 PM	1215	"	16.1 / 1.62	752			.	
1:00 PM	1275	"	16.1 / 1.62	760			.	
2:00	1335	"	" / "	763			.	
3:00	1395	"	" / "	758			.	
4:00	1455	"	" / "	763			.	
5:00	1515	"	" / "	763			.	
6:00	1575	"	16.1 / 1.62	758			.	
7:00	1635	"	16.1 / 1.62	748	275		19.9	
8:00	1695	"	" / "	751	278		19.9	
9:00	1755	"	" / "	760	276		19.9	
10:00	1815	"	" / "	758	278		19.9	
11:00	1875	"	" / "	747	275		19.9	
12:00 AM	1935	"	" / "	753	274		19.9	
1:00	1995	"	" / "	760	276		19.9	
2:00	2055	"	" / "	749	274		19.9	
3:00	2115	"	" / "	756	274		19.9	
4:00	2175	667.38	16.1 / 1.62	742	275		19.9	



Table 2 (CRPTD Form 12/17/97)

Suggested Elapsed time 1/21/02 (min)	Actual Elapsed Time t (min)	Depth to water (nearest 0.1 ft)	Line & Drawdown S (unadjusted to nearest 0.1 ft)	Pumping rate Q (at least 3 steps) (gpm)	EC (μmhos)	Cl ⁻ (mg/l)	Temp. °F or °C	Data in this table is for: <input checked="" type="checkbox"/> Pumped Well <input type="checkbox"/> Observation Well Remarks
5:00 AM	2235	667.38	16.1 / 1.62	748	275		19.9	
6:00	2295	"	16.1 / 1.62	750	275		19.9	
7:00	2355	"	16.1 / 1.62	748	276		19.9	
8:00	2415	"	16.1 / 1.62	742	275	60	19.8	
9:00	2475	"	16.1 / 1.62	747	277		19.8	
10:00	2535	"	16.1 / 1.62	747	278		19.8	
11:00	2595	667.38	16.1 / 1.62	739	278		20.1	
12:00 PM	2655	667.15	16.2 / 1.39	753	273	55	20.1	
1:00 PM	2715	667.15	16.2 / 1.39	744	290		20.1	
2:00	2775	"	16.2 / 1.39	740	292		20.1	
3:00	2835	"	16.2 / 1.39	745	297		20.0	
4:00	2895	"	16.2 / 1.39	743	296		19.8	
5:00	2955	667.15	16.2 / 1.39	747	297		19.8	
6:00	3015	667.38	16.1 / 1.62	744	298	55	19.9	
7:00	3075	667.38	16.1 / 1.62	739	297		19.9	
8:00	3135	"	16.1 / 1.62	742	297		19.9	
9:00	3195	"	16.1 / 1.62	741	299		19.9	
10:00	3255	"	16.1 / 1.62	749	298		19.9	
11:00	3315	"	16.1 / 1.62	739	299		19.9	
1/22/02 12:00 AM	3375	"	16.1 / 1.62	745	298	55	19.9	
1:00 AM	3435	"	16.1 / 1.62	749	298		19.9	
2:00	3495	"	16.1 / 1.62	745	299		19.9	
3:00	3555	"	16.1 / 1.62	752	301		19.9	
4:00	3615	"	16.1 / 1.62	742	301		19.9	
5:00	3675	667.38	16.1 / 1.62	751	302		19.9	
6:00	3735	667.15	16.2 / 1.39	740	306	55	19.8	
7:00	3795	667.15	16.2 / 1.39	738	305		19.8	
8:00	3855	"	16.2 / 1.39	745	306		19.8	
9:00	3915	"	16.2 / 1.39	736	308		20.0	
10:00	3975	"	16.2 / 1.39	744	310		20.3	
11:00	4035	"	16.2 / 1.39	770	308		20.5	
12:00 PM	4095	"	16.2 / 1.39	776	306	60	20.4	
1:00 PM	4155	"	16.2 / 1.39	768	306		20.5	



1

Table 2 (CRPTD Form 12/17/97)

Suggested Elapsed time t (min)	Actual Elapsed Time t (min)	Depth to water (nearest 0.1 ft)	Drawdown S (unadjusted to nearest 0.1 ft)	Pumping rate Q (at least 3 steps) (gpm)	EC (μmhos)	Cl ⁻ (mg/l)	Temp. ° F or X ° C	Data in this table is for: <input type="checkbox"/> Pumped Well <input checked="" type="checkbox"/> Observation Well	Remarks
1/23/62 Pk 2:00	42.15	667.15	16.2 / 1.39	770	303		20.4		
3:00	42.75	"	16.2 / 1.39	775	297		20.4		
4:00	43.35	"	16.2 / 1.39	767	298		20.4		
5:00	43.95	"	16.2 / 1.39	777	297		20.4		
6:00	44.55	667.15	16.2 / 1.39	760	291	50	19.9		
7:00	45.15	667.38	16.1 / 1.62	760	292		19.9		
8:00	45.75	"	16.1 / 1.62	775	309		19.9		
9:00	46.35	"	16.1 / 1.62	769	304		19.9		
10:00	46.95	"	16.1 / 1.62	773	307		19.9		
11:00	47.55	"	16.1 / 1.62	768	303		19.9		
1/23/62 AM 12:00	48.15	"	16.1 / 1.62	759	306	50	19.9		
1:00	48.75	"	16.1 / 1.62	767	309		19.9		
2:00	49.35	"	16.1 / 1.62	753	306		19.9		
3:00	49.95	667.38	16.1 / 1.62	772	312		19.9		
4:00	50.55	667.15	16.2 / 1.39	758	306		19.9		
5:00	51.15	667.15	16.2 / 1.39	761	303		19.9		
6:00	51.75	667.38	16.1 / 1.62	756	314	60	19.9		
7:00	52.35	"	16.1 / 1.62	785	307		19.9		
8:00	52.95	"	16.1 / 1.62	788	304		19.7		
9:00	53.55	"	16.1 / 1.62	778	310		19.7		
10:00	54.15	"	16.1 / 1.62	774	309		20.4		
11:00	54.75	"	16.1 / 1.62	774	311		21.2		
12:00 PM	55.35	667.15	16.2 / 1.39	765	314	60	20.9		
1:00	55.95						.		Meter Rdy
2:00	56.55						.		
3:00	57.15						.		
4:00	57.75						.		
12:45	55.80	667.15	16.2 / 1.39	768	305		20.9		

Suggested elapsed time † (min)	Actual elapsed time t (min)	Depth to water (nearest 0.1 ft)	Recovery Drawdown <i>Air & line</i> Feet (unadjusted to nearest 0.1 ft)	Pumping rate q (gpm)	EC (µmhos)	Cl ⁻ (mg/l)	Temp. ° F or ° C	Data in this table is for: <input type="checkbox"/> Pumped Well <input type="checkbox"/> Observation Well Remarks
0	0			0			.	Start recovery
1	1/2		17.15 ⁺ + 0.80	0			.	
1.5	1		17.35 ⁺ + 1.27	0			.	
2	1 1/2		17.3 ⁺ + 1.15	0			.	
2.5	2		17.2 ⁺ + 0.92	0			.	
3	2 1/2		17.15 ⁺ + 0.80	0			.	
4	3		17.05 ⁺ + 0.58	0			.	
5	3 1/2		16.95 ⁺ + 0.35	0			.	
6	4		16.9 ⁺ + 0.23	0			.	
7	5		16.85 ⁺ + 0.12	0			.	
8	6		16.8 ⁰	0			.	
10	7		16.8 ⁰	0			.	
15	8		16.85 ⁺ + 0.12	0			.	
20	9		16.8 ⁰	0			.	
25	10		16.8 ⁰	0			.	
30	15		16.85 ⁺ + 0.12	0			.	
40	20		16.8 ⁰	0			.	
50	25		16.82 ⁺ + 0.05	0			.	
60	30		16.85 ⁺ + 0.12	0			.	
70	40		16.9 ⁺ + 0.23	0			.	
80	50		16.9 ⁺ + 0.23	0			.	
90	60		16.9 ⁺ + 0.23	0			.	
100	1260 min		16.8 ⁰	0		@ 08:45.1/24/02	.	
150				0			.	
200				0			.	X 100%
250				0			.	<input type="checkbox"/> 80% recovery achieved <input type="checkbox"/> 80% recovery not achieved

END TEST Date: 1/23/02 Time of day: Start Recovery @ 12:45 PM

ADDITIONAL REMARKS:

Person in charge of pump test (print): Tracy Underwood

Signature: Tracy Underwood

The signature above indicates that the data reported on this form is accurate and true to the best of the person's knowledge who operated this pump test.



BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII



GILBERT S. COLOMA-AGARAN
CHAIRPERSON

BRUCE S. ANDERSON
MEREDITH J. CHING
CLAYTON W. DELA CRUZ
BRIAN C. NISHIDA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

January 11, 2002

Mr. David Craddick, Director
County of Maui
Department of Water Supply
200 South High Street
Wailuku, HI 96793

Dear Mr. Craddick:

After-the-Fact Variance
East Maui Water Development Plan Monitor Well (Well No. 5418-01)

Thank you for your letter of December 18, 2001, announcing your instructions to drill "the monitor well in Haiku" (sic) deeper than one-fourth the theoretical aquifer thickness. Only the Commission can issue an after-the-fact variance, subject to possible fines.

Please be aware that we have adopted a process whereby the necessity to drill deeper in such instances as you describe (with evidence of higher water levels) can be approved in a one-day turnaround period by contacting us with your information before you exceed the standard one-fourth limitation. There may be other circumstances in which drilling deeper than one-fourth the theoretical aquifer thickness could be approved administratively, but these, too, would require evidence and discussion prior to administrative variance approval.

If you have any questions, please contact Charley Ice of the Water Commission staff at 587-0251 or toll-free at 984-4644, extension 70251.

Sincerely,

A handwritten signature in black ink, appearing to read "Linnel T. Nishioka".

LINNEL T. NISHIOKA
Deputy Director

CI:ss

c: Water Resources International, Inc.



DEPARTMENT OF WATER SUPPLY

COUNTY OF MAUI

P.O. BOX 1109

WAILUKU, MAUI, HAWAII 96793-6109

TELEPHONE (808) 270-7816 • FAX (808) 270-7833 • www.mauiwater.org

RECEIVED
12/21/01

DEC 21 AIO : 17

December 18, 2001

Ms. Linnel Nishioka, Deputy Director
Commission on Water Resource Management
Dept. of Land & Natural Resources
P. O. Box 621
Honolulu, Hawaii 96809

Dear Ms. Nishioka:

The monitor well in Haiku, Maui, which is being drilled to comply with the Court Order specifying the requirements for a Supplemental Environmental Impact Statement (SEIS), has reached its projected depth of 50 feet below sea level (BSL), but we believe another 15 feet of depth is required to allow a test yield of up to 1000 gpm. Video logs of the well show good water movement in the lowest 5 feet of the well. Preliminary measurements place the water level at approximately 5 feet ASL, somewhat less than predicted, although this level is preliminary and may rise by up to a foot. The CWRM well standards suggest the depth of a well in a basal aquifer be no more than 25 percent of the theoretical thickness of the freshwater lens at the well site. If the water level is 5 feet ASL, the suggested depth should be 50 feet BSL (.25x40x5).

We have instructed the driller to drill an additional 15 feet. This decision was made in order to minimize costs that would accrue from the delay awaiting permission from the Commission.

Sincerely,

David R. Craddick
Director

DRC:sc

DEC 20 2001

"By Water All Things Find Life"

Printed on recycled paper



COMMISSION ON WATER RESOURCE MANAGEMENT

(3/01)

FROM: LINNEL

DATE: DEC 21 2001

SUSPENSE DATE: _____

TO:

INIT.

TO:

INIT.

FOR:

PLEASE:

BAUER, G.
CHING, F.
DANBARA, S.
FUJII, N.
HARDY, R.
HIGA, D.
HIRANO, E.
ICE, C.
IMATA, R.
JINNAI, R.

approval
nature
information

See Me
Review & Comment
Take Action
Type Draft
Type Final
File
Xerox _____ copies
Last person - trash

Roy,
Is this letter
okay with you
normally it

people don't get

ATP variances
let's discuss
shorts,

Charley,
edits o.k.

did I get
them right?

can administratively approve, but

ignoring that. Our new

unwritten policy seems to be they pump

Test - get us data same day - we analyze
and give o.k. to go deeper. Charley, please
call and let them know - otherwise violation.

Craddick
he's corrected his writer
already

Isn't this. Sub
Craddick: Enforcement act
will pay to re-cement if pump
? pump tests will be fine
most likely - it's optimization
of infrastructure that is the issue.

not Mike
Robertson

ATP variance



100

12/20/01

WATER RESOURCES INTERNATIONAL, INC.

P.O. Box 44301
Kamuela, Hawaii 96743
Tel: (808) 882-7207 Fax: (808) 882-7655

LETTER OF TRANSMITTAL

Date: December 17, 2001	Job No.
RE: EMWDP Monitor Well	
Well No. 5418-01	
<i>Mitch please log in. thx</i>	

TO: Department of Land and Natural Resources
Commission on Water Resource Management
PO Box 621
Honolulu, Hawaii 96809
ATT: Gilbert S. Coloma-Agaran, Chairperson

GENTLEMEN:

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via _____ the following items:

- | | | | | |
|---|---------------------------------------|--------------------------------|----------------------------------|---|
| <input type="checkbox"/> Shop Drawings | <input type="checkbox"/> Prints | <input type="checkbox"/> Plans | <input type="checkbox"/> Samples | <input type="checkbox"/> Specifications |
| <input type="checkbox"/> Copy of letter | <input type="checkbox"/> Change order | <input type="checkbox"/> _____ | | |

COPIES	DATE	NO.	DESCRIPTION
	12/17/01	1	Original, fully executed Well Construction Permit

THESE ARE TRANSMITTED as checked below:

- | | | |
|--|---|---|
| <input type="checkbox"/> For approval | <input type="checkbox"/> Approved as submitted | <input type="checkbox"/> Resubmit _____ copies for approval |
| <input type="checkbox"/> For your use | <input type="checkbox"/> Approved as noted | <input type="checkbox"/> Submit _____ copies for distribution |
| <input checked="" type="checkbox"/> As requested | <input type="checkbox"/> Returned for corrections | <input type="checkbox"/> Return _____ corrected prints |
| <input type="checkbox"/> For review and comment | <input type="checkbox"/> _____ | |
| <input type="checkbox"/> FOR BIDS DUE _____ | | <input type="checkbox"/> PRINTS RETURNED AFTER LOAN TO US |

REMARKS

COPY TO WRII Honolulu

SIGNED *Blaise Clay*
Blaise Clay,
Vice President - Drilling Operations

If enclosures are not as noted, kindly notify us.



BRUCE S. ANDERSON
ROBERT G. GIRALD
BRIAN C. NISHIDA
DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

NOV 23 2001

5418-01.wcp

Mr. David Craddick
Maui Department of Water Supply
200 South High Street
Wailuku, Maui, HI 96793

Dear Mr. Craddick:

Well Construction Permit
EMWDP Monitor Well (Well No. 5418-01)

Enclosed are two (2) copies of your approved Well Construction Permit for the captioned well(s) that authorize well construction activities but excludes installation work for your permanent pump. As part of the Chairperson's approval, the following special conditions were added and are part of your permit under Permit Condition 13:

Special Conditions

1. Attached for your information is a copy of the Department of Health's (DOH) review comments. Please note DOH's requirements related to discharge of effluent from well drilling and testing activities.
2. Well depth shall not exceed one-fourth the theoretical aquifer thickness.
3. The well casing shall meet the minimum thickness required in the Hawaii Well Construction and Pump Installation Standards (HWCPIS, January 1997).
4. Upon applying for a pump installation permit for this well, the permittee shall submit step-drawdown and constant-rate pumping tests, documentation of compliance with HRS Chapter 343, and of a Governor's Executive Order setting aside the site for this purpose.

This permit **does not** authorize work for your permanent pump installation. Approval and issuance of your pump installation permit is contingent upon completed application and information provided to and accepted by Commission staff as required in the Well Construction & Pump Installation Standards (1/23/97) and any special conditions performed under this permit. However, a permanent pump may be installed prior to the permanent pump installation permit issuance in accordance with the Commission's April 15, 1998 Declaratory Ruling No. DEC-ADM98-G5, which states that:

"Permanent pump installation for capacities between 0-70 gpm and where the proposed use is for private individual needs in non-ground-water management areas may be allowed prior to the final pump installation permit issuance. When required as a condition of the well construction permit, subsequent pumping tests shall validate the acceptability of the permanent pump. The permanent pump installed prior to final pump installation permit issuance is subject to removal if the testing shows that a smaller pump is required to reduce the potential of affecting neighboring wells and localized upconing at the applicant's well."

If you qualify and wish to take advantage of this ruling, please include a written request to install the permanent pump prior to final pump installation permit issuance when you return to us your signed well construction permit.

Please sign and have the contractor sign both permit originals and return one for our files. Also, copies of the aquifer pump test worksheet and the well completion report form are enclosed for your use.

IMPORTANT - Drilling work shall not commence until a fully signed permit is returned to the Commission. Please provide all the information in this packet to your well drilling contractor. The permittee, well operator, and/or well owner are responsible for all conditions of the permit. This includes ensuring that the well construction contractor, or other party who constructs the well(s), submits a completed Part I of the Well Completion Report form (enclosed) within sixty (60) days after the well construction work is completed. Be advised that you may be subject to fines of up to \$1000 per day for any violations of your permit conditions starting from the permit approval date.

If you have any questions, please call Charley Ice of the Commission staff at 587-0251 or toll-free at 984-2400 extension 70251.

Aloha,


GILBERT S. COLOMA-AGARAN
Chairperson

Enclosures
c. Water Resources International, Inc.

WELL CONSTRUCTION PERMIT
EMWDP Monitor Well, Well No. 5418-01

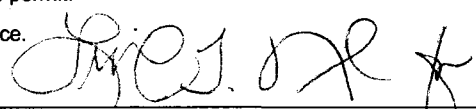
Note: This permit shall be prominently displayed at the site until the work is completed

In accordance with Department of Land and Natural Resources, Commission on Water Resource Management's Administrative Rules, Section 13-168, entitled "Water Use, Wells, and Stream Diversion Works", this document permits the construction and testing of EMWDP Monitor Well (Well No. 5418-01) at Pauwela Gulch @ 600 ft el, Pauwela Homesteads, Maui, TMK 2-7-8:8, subject to the Hawaii Well Construction & Pump Installation Standards (1/23/97) which include but are not limited to the following conditions:

1. The Chairperson of the Commission on Water Resource Management (Commission), P.O. Box 621, Honolulu, HI 96809, shall be notified, in writing, at least two (2) weeks before any work authorized by this permit commences and staff shall be allowed to inspect installation activities in accordance with §13-168-15, Hawaii Administrative Rules.
2. The well construction permit shall be for construction and testing of the well only. A minimum 1 1/4-inch diameter monitor tube shall be permanently installed, in a manner acceptable to the Chairperson, to accurately record water levels. The permittee, well operator, and/or well owner shall coordinate with the Chairperson and conduct a pumping test in accordance with the Standards (**a pump testing worksheet is attached**). The permittee, well operator, and/or well owner shall submit to the Chairperson the test results as a basis for supporting an application to install a permanent pump and withdraw water for use. No permanent pump may be installed until a pump installation permit is approved and issued by the Chairperson.
3. In basal ground water, the depth of the well may not exceed one-fourth (1/4) of the theoretical thickness (41 times initial head) of the basal ground water unless otherwise authorized by the Chairperson.
4. The permittee, well operator, and/or well owner shall incorporate mitigation measures to prevent construction debris from entering the aquatic environment, to schedule work to avoid periods of high rainfall, and to revegetate any cleared areas as soon as possible.
5. In the event that subsurface cultural remains such as artifacts, burials or concentrations of shells or charcoal are encountered during construction, the permittee, well operator, and/or well owner shall stop work and contact the Department's Historic Preservation immediately.
6. The proposed well construction shall not adversely affect existing or future legal uses of water in the area, including any surface water or established instream flow standards. This permit or the authorization to construct the well shall not constitute a determination of correlative water rights.
7. The following shall be submitted to the Chairperson within sixty (60) days after completion of work:
 - a. Well completion report, (**attached - Part I, Well Construction Report**).
 - b. Elevation (referenced to mean sea level, msl) survey by a Hawaii-licensed surveyor.
 - c. As-built sectional drawing of the well.
 - d. Plot plan and map showing the exact location of the well.
 - e. Complete pumping test records, including time, pumping rate, drawdown, chloride content, and other data.
8. The permittee, well operator, and/or well owner shall comply with all applicable laws, rules, and ordinances; non-compliance may be grounds for revocation of this permit.
9. The well construction permit application is incorporated into this permit by reference and is subject to the Hawaii Well Construction & Pump Installation Standards (January 23, 1997; HWCPLS). If the HWCPLS are not followed and as a consequence water is wasted or contaminated, **a lien on the property may result**.
10. The permit may be revoked by the Commission if work is not started within six (6) months after the date of approval or if work is suspended or abandoned for six (6) months, unless otherwise specified. The work proposed in the well construction permit application shall be completed within two (2) years from the date of permit approval, unless otherwise specified. The permit may be extended by the Chairperson upon a showing of good cause and good-faith performance. A request to extend the permit shall be submitted to the Chairperson no later than three (3) months prior to the date the permit expires. If the commencement date is not met, the Commission may revoke the permit after giving the permittee, well operator, and/or well owner notice of the proposed action and an opportunity to be heard.
11. If the well is not to be used it must be properly capped. If the well is to be abandoned then the permittee, well operator, and/or well owner must apply for a well abandonment permit in accordance with §13-168-12(f) prior to any well sealing or plugging work.
12. The permittee, its successors, and assigns shall indemnify, defend, and hold the State of Hawaii harmless from and against any loss, liability, claim, or demand for property damage, personal injury, or death arising out of any act or omission of the applicant, assigns, officers, employees, contractors, and agents under this permit or relating to or connected with the granting of this permit.
13. Special conditions in the attached cover transmittal letter are incorporated herein by reference.

Date of Approval: **October 29, 2001**

Expiration Date: **October 29, 2003**


GILBERT S. COLOMA-AGARAN, Chairperson
Commission on Water Resource Management

I have read the conditions and terms of this permit and understand them. I accept and agree to meet these conditions as a prerequisite and underlying condition of my ability to proceed and understand that I shall not commence work until I and the driller have signed, dated, and returned the permit to the Commission. I also understand that non-compliance with any permit condition may be grounds for revocation and fines of up to \$1000 per day starting from the permit date of approval.

Permittee's Signature: _____

Date: _____

Printed Name: _____ Firm or Title: _____

Driller's Signature: _____ C-57 License # : _____ Date: _____

Printed Name: _____ Firm or Title: _____

Please sign both copies of this permit, return one to the Chairperson, and retain the other for your records.

Attachment

c: USGS
Department of Health/ Safe Drinking Water, Wastewater, and Clean Water Branches
Maui Department of Water Supply
Water Resources International, Inc.

WELL CONSTRUCTION PERMIT
EMWDP Monitor Well, Well No. 5418-01

12/20/01

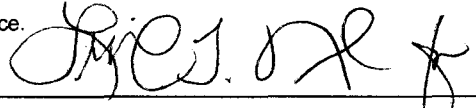
Note: This permit shall be prominently displayed at the site until the work is completed

In accordance with Department of Land and Natural Resources, Commission on Water Resource Management's Administrative Rules, Section 13-168, entitled "Water Use, Wells, and Stream Diversion Works", this document permits the construction and testing of EMWDP Monitor Well (Well No. 5418-01) at Pauwela Gulch @ 600 ft el, Pauwela Homesteads, Maui, TMK 2-7-8:8, subject to the Hawaii Well Construction & Pump Installation Standards (1/23/97) which include but are not limited to the following conditions:

1. The Chairperson of the Commission on Water Resource Management (Commission), P.O. Box 621, Honolulu, HI 96809, shall be notified, in writing, at least two (2) weeks before any work authorized by this permit commences and staff shall be allowed to inspect installation activities in accordance with §13-168-15, Hawaii Administrative Rules.
2. The well construction permit shall be for construction and testing of the well only. A minimum 1 1/4-inch diameter monitor tube shall be permanently installed, in a manner acceptable to the Chairperson, to accurately record water levels. The permittee, well operator, and/or well owner shall coordinate with the Chairperson and conduct a pumping test in accordance with the Standards (a pump testing worksheet is attached). The permittee, well operator, and/or well owner shall submit to the Chairperson the test results as a basis for supporting an application to install a permanent pump and withdraw water for use. No permanent pump may be installed until a pump installation permit is approved and issued by the Chairperson.
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 - a. Well completion report, (attached - Part I, Well Construction Report).
 - b. Elevation (referenced to mean sea level, msl) survey by a Hawaii-licensed surveyor.
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 - d. Plot plan and map showing the exact location of the well.
 - e. Complete pumping test records, including time, pumping rate, drawdown, chloride content, and other data.
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9. The well construction permit application is incorporated into this permit by reference and is subject to the Hawaii Well Construction & Pump Installation Standards (January 23, 1997; HWCPIIS). If the HWCPIIS are not followed and as a consequence water is wasted or contaminated, a lien on the property may result.
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Commission on Water Resource Management

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Permittee's Signature: 

Date: 12-07-01

Printed Name: David Craddick

Firm or Title: Director / Water Supply

Driller's Signature: 

C-57 License #: AC 05058 Date: 12/17/01

Printed Name: Blaise Clay

Firm or Title: Vice President
Water Resources Intl. Inc.

Please sign both copies of this permit, return one to the Chairperson, and retain the other for your records.

Attachment
c:

USGS
Department of Health/ Safe Drinking Water, Wastewater, and Clean Water Branches
Maui Department of Water Supply
Water Resources International, Inc.

BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII



FVI ✓
GILBERT S. COLOMA-AGARAN
CHAIRPERSON

BRUCE S. ANDERSON
ROBERT G. GIRALD
BRIAN C. NISHIDA
DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

NOV 23 2001

5418-01.wcp

Mr. David Craddick
Maui Department of Water Supply
200 South High Street
Wailuku, Maui, HI 96793

Dear Mr. Craddick:

Well Construction Permit
EMWDP Monitor Well (Well No. 5418-01)

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2. Well depth shall not exceed one-fourth the theoretical aquifer thickness.
3. The well casing shall meet the minimum thickness required in the Hawaii Well Construction and Pump Installation Standards (HWCPIIS, January 1997).
4. Upon applying for a pump installation permit for this well, the permittee shall submit step-drawdown and constant-rate pumping tests, documentation of compliance with HRS Chapter 343, and of a Governor's Executive Order setting aside the site for this purpose.

This permit **does not** authorize work for your permanent pump installation. Approval and issuance of your pump installation permit is contingent upon completed application and information provided to and accepted by Commission staff as required in the Well Construction & Pump Installation Standards (1/23/97) and any special conditions performed under this permit. However, a permanent pump may be installed prior to the permanent pump installation permit issuance in accordance with the Commission's April 15, 1998 Declaratory Ruling No. DEC-ADM98-G5, which states that:

"Permanent pump installation for capacities between 0-70 gpm and where the proposed use is for private individual needs in non-ground-water management areas may be allowed prior to the final pump installation permit issuance. When required as a condition of the well construction permit, subsequent pumping tests shall validate the acceptability of the permanent pump. The permanent pump installed prior to final pump installation permit issuance is subject to removal if the testing shows that a smaller pump is required to reduce the potential of affecting neighboring wells and localized upconing at the applicant's well."

If you qualify and wish to take advantage of this ruling, please include a written request to install the permanent pump prior to final pump installation permit issuance when you return to us your signed well construction permit.

Please sign and have the contractor sign both permit originals and return one for our files. Also, copies of the aquifer pump test worksheet and the well completion report form are enclosed for your use.

IMPORTANT - Drilling work shall not commence until a fully signed permit is returned to the Commission. Please provide all the information in this packet to your well drilling contractor. The permittee, well operator, and/or well owner are responsible for all conditions of the permit. This includes ensuring that the well construction contractor, or other party who constructs the well(s), submits a completed Part I of the Well Completion Report form (enclosed) within sixty (60) days after the well construction work is completed. Be advised that you may be subject to fines of up to \$1000 per day for any violations of your permit conditions starting from the permit approval date.

If you have any questions, please call Charley Ice of the Commission staff at 587-0251 or toll-free at 984-2400 extension 70251.

Aloha,

GILBERT S. COLOMA-AGARAN
Chairperson

Enclosures

c. Water Resources International, Inc.

Copyright 11/20/2001 by Hawaii Information Service



PUBLIC RECORD DATA

Taxkey	Subdiv/Condo	Tnr	Property Address	Owner/Lessee	Beds Baths	Land area	Living area
2-2-7-8-8	Haiku	G		STATE OF HAWAII		3.90 ac	

This information has been supplied by third parties and has not been independently verified by Hawaii Information Service and is, therefore, not guaranteed.

Well No. 5418-01
 Well Name EMWDP Monitor Well
 Applicant MBWS

Date of Review 11/20/01
 Reviewer RRI

SECTION 1: WELL LOCATION INFORMATION

Island	MAUI	Proposed Use	Other
Aquifer System	KOOLAU	Proposed Withdrawal	0
Aquifer Sector	HAIKU	System Sustainable Yield	31

SECTION 2: WELL SECTION DATA *(enter data in grey cells only)*

Elevation at top of casing	654 ft., m.s.l.	Solid Casing	
Ground Elevation	652 ft., m.s.l.	Material	Steel
Cement Grout	651 ft.	Designation	ASTM A53
Rock Packing	650 ft.	Length	66 ft.
Hole Diameter	650 in.	Diameter	650 in.
Total Depth	733 ft. <i>ver 1</i>	Wall Thickness	0 in. <i>.375 ver 1</i>
Estimated Head	0 ft. <i>4.68 meas.</i>	Casing	
Calculated Aquifer Thickness	0 ft. <i>187.2</i>	Material	Steel
County Water Supply (Y/N ?)	YES	Designation	ASTM A139
		Length	ft.
		Diameter	in.
		Wall Thickness	in.
		Openings	sq.in./l.f.
		Open Hole	
		Length	ft.
		Diameter	in.

SECTION 3: CHECKLIST *(values to check are shaded)*

Well Depth

Theoretical Thickness of Aquifer 0 ft.
 1/4 Aquifer Thickness 0 ft.
 Depth of Well below Sea Level 52 ft. *too deep* (refer to HWCPIS Section 2.2)

Well Casing

Minimum Wall Thickness

Material

Steel

County or Non-County

county

Minimum Thickness per standards

0.375 in.

Wall Thickness Provided

0.000 in.

too small (refer to HWCPIS Section 2.4 c)

Minimum Length of Solid Casing

595.8 ft.

90% of ground to top of aquifer

665 ft.

Length of solid casing Provided

665 ft.

okay (refer to HWCPIS Section 2.4 d)

Casing Material

ASTM A53

okay (refer to HWCPIS Section 2.4 e)

Annular Space

Depth of Grouting

Calculated Depth of Grouting

463.4 ft.

Depth of Grouting provided

559 ft.

okay (refer to HWCPIS Section 2.6 c)

Thickness of Annular Space

5 in.

okay (refer to HWCPIS Section 2.6 d)



**COMMISSION ON WATER RESOURCE MANAGEMENT
ROUTE SLIP FOR PERMIT ISSUANCE**

FROM: CHARLEY

DATE: 13 Nov 01

SUSPENSE DATE: _____

TO:	INIT.	TO:	INIT.	FOR:	PLEASE:
BAUER, G.	_____	LUM, A.	_____	3 Approval	See Me
CHING, F.	_____	NAKAMA, L.	_____	3 Signature	1 Review & Comment
FUJII, N.	_____	NAKANO, D.	_____	4 Information	Take Action
1 HARDY, R.	<u>R</u>	3 NISHIOKA, L.	<u>LN</u>		Type Draft
HIGA, D.	_____	4 OHYE, M.	<u>MO</u>		2 Type Final
HIRANO, E.	_____	SAKODA, E.	_____		5 File
5 ICE, C.	_____	2 SUBIA, S.	<u>SS</u>		Xerox _____ copies
IMATA, R.	_____	SWANSON, S.	_____		
JINNAI, R.	_____	UYENO, D.	_____		
KUNIMURA, I.	_____	YODA, K.	_____		

WELL NUMBER 5418-01

WELL NAME EMWDP Monitor Well

☐ WELL CONSTRUCTION

ATTACHMENTS FOR WELL CONSTRUCTION PERMIT:

- 1 COVER LETTER ☒
- 2 PERMIT (2x) ☒
- 3 PUMP TEST ☒
- 4 DOH COMMENTS ☒
- 5 LAND DIV. COMMENTS ☒
- 6 WCR FORM ☒

TO BE SENT TO APPLICANT

FOR OFFICE USE ONLY

☐ PUMP INSTALLATION

ATTACHMENTS FOR PUMP INSTALLATION PERMIT:

- 1 COVER LETTER _____
- 2 PERMIT (2x) _____
- 3 DOH COMMENTS _____
- 4 LAND DIV. COMMENTS _____
- 5 WCR FORM _____
- 6 WUR FORM _____

TO BE SENT TO APPLICANT

FOR OFFICE USE ONLY

When did we pump?
[Handwritten signatures and notes]

BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII

RECEIVED
LAND DIVISION



10/29/01

GILBERT S. COLOMA-AGARAN
CHAIRPERSON

BRUCE S. ANDERSON
ROBERT G. GIRALD
BRIAN C. NISHIDA
DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

2001 SEP 28 P 3:48

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

SEP 28 2001

TO: Harry Yada, Acting Administrator
Land Division

FROM: Linnet T. Nishioka, Deputy Director
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
EMWDP Monitor Well (Well No. 5418-01)

Transmitted for your review and comment is a copy of the captioned well application which includes a request for a pump installation permit.

We would appreciate your comments on the captioned application with regard to the programs, plans, and objectives specific to your division. **Please respond by returning this cover memo form by October 12, 2001.** If we do not receive comments or a request for additional review time by this date, we will assume you have no comments.

Please find the attached maps to locate the proposed well. If you have any questions about this permit application, request additional information, or request additional review time, please contact Charley Ice of the Commission staff at 587-0251.

Cl:ky
Attachment(s)

RESPONSE:

[] A water lease/permit is required of this applicant and an application for such will be requested by our division.

[] A water lease/permit is **not** required of this applicant.

[] A water lease/permit has been obtained by the applicant through lease no. _____.

[] Other relevant Land Division rules/regulations, information, or recommendations are attached.

[] No objections On July 13, 2001 (D-28), the Land Board approved a right-of-entry to County of Maui Board of Water Supply, to drill and utilize this monitor well for data collection and sampling purposes. If the results are favorable, BWS might pursue conversion of the monitor well into a production well. This would require further action by

xxx Other comments:

Contact Person: Eric Leong

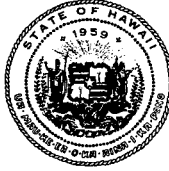
Phone: 587-0386

Signed:

Date: OCT 25 2001

the Land Board for set aside by Governor's Executive Order and anything else deemed necessary. If BWS does not pursue conversion of the well into production, BWS shall seal the well in accordance with all applicable rules and regulations.

BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII



10/15/01

BRUCE S. ANDERSON, Ph.D., M.P.H.
DIRECTOR OF HEALTH

**STATE OF HAWAII
DEPARTMENT OF HEALTH**

P.O. BOX 3378
HONOLULU, HAWAII 96801

In reply, please refer to:
EMD / WB

STATE MESSENGER

Date: ~~10-01~~ 10-10-01

To: Commission on Water Resource Management
Department of Land and Natural Resources
State of Hawaii

Attention: Charley Ice
Commission Staff Member

From: Wastewater Branch
Department of Health
State of Hawaii

Attention: Lori Kajiwara
Planner, Planning/Design Section
Phone (808) 586-4294 Fax (808) 586-4300
Email: lkajiwara@eha.health.state.hi.us

Subject: Well Construction/Pump Installation Permit Application
Response

STATE MESSENGER

BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII



STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

ALL: you
OCT 2 2001
GILBERT S. COLOMA-AGARAN
CHAIRPERSON

BRUCE S. ANDERSON
ROBERT G. GIRALD
BRIAN C. NISHIDA
DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

affm: KOS

SEP 28 2001

TO: Honorable Bruce S. Anderson, Director
Department of Health
Attention: Dennis Tulang, Wastewater Branch
William Wong, Safe Drinking Water Branch
Dr. Keith Kawaoka, Hazardous Evaluation and Emergency Response
Alec Wong, Clean Water Branch

FROM: Gilbert S. Coloma-Agaran, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
EMWDP Monitor Well (Well No. 5418-01)

Transmitted for your review and comment is a copy of the captioned well application.

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. **Please respond by returning this cover memo form by October 12, 2001.** If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

Please find the attached maps to locate the proposed well. If you have any questions about this permit application, request additional information, or request additional review time, please contact Charley Ice of the Commission staff at 587-0251.

CI:ky
Attachment(s)

RESPONSE:

- ☐ This well qualifies as a source which will serve as a source of potable water to a public water system (defined as serving 25 or more people at least 60 days per year or has 15 or more service connections) and **must** receive Director of Health approval **prior** to its use to comply with Hawaii Administrative Rules (HAR), Title 11, Chapter 20, Rules Relating to Potable Water Systems, §11-20-29.
- ☐ This well does not qualify as a source serving a public water system (serves less than 25 people or more people at least 60 days per year or 15 service connections) and if the well water is used for drinking, the private owner **should** test for bacteriological and chemical presence before initiating such use and routinely monitor the water quality thereafter. However, if future planned use from this source increases to meet the public water system definition then Director of Health approval is required **prior** to implementation.
- ☐ If the well is used to supply both potable and non-potable purposes in a single system, the user shall eliminate cross-connections and backflow connections by physically separating potable and non-potable systems by an air gap or an approved backflow preventer, and by clearly labeling all non-potable spigots with warning signs to prevent inadvertent consumption of non-potable water. Backflow prevention devices should be routinely inspected and tested.
- ☐ It does not appear that this well will be used for consumptive purposes and is not subject to Safe Drinking Water Regulations.
- ☐ For the applicant's information, a source of possible wastewater contamination ☐ is ☐ is not located near the proposed well site (information attached).
- ☐ An NPDES permit is required.
- ☒ Other relevant DOH rules/regulations, information, or recommendations are attached.
- ☒ No comments/objections **No Record.**

Contact Person:

Loi N. Kajimura

Phone:

586 4294

Signed:

Loi N. Kajimura

Date:

10-10-01

RECEIVED
OCT 15 10:47



OCT 2 2001

BENJAMIN J. CAYETANO
GOVERNOR OF HAWAIIGILBERT S. COLOMA-AGARAN
CHAIRPERSONBRUCE S. ANDERSON
ROBERT G. GIRALD
BRIAN C. NISHIDA
DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.LINNELL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 821
HONOLULU, HAWAII 96809

SEP 28 2001

TO: Honorable Bruce S. Anderson, Director
Department of Health
Attention: Dennis Tulang, Wastewater Branch
William Wong, Safe Drinking Water Branch
Dr. Keith Kawaoka, Hazardous Evaluation and Emergency Response
Alec Wong, Clean Water Branch

FROM: Gilbert S. Coloma-Agaran, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
EMWDP Monitor Well (Well No. 5418-01)

Transmitted for your review and comment is a copy of the captioned well application.

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. **Please respond by returning this cover memo form by October 12, 2001.** If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

Please find the attached maps to locate the proposed well. If you have any questions about this permit application, request additional information, or request additional review time, please contact Charley Ice of the Commission staff at 587-0251.

CI:ky
Attachment(s)

Post-it* Fax Note

7671

Date	# of pages
10/10/01	2
To: Charley Ice	From: Alec Wong
Co./Dept: DNR/CWRM	Co.: DOH/CWB
Phone # 587-0251	Phone # 586-4309
Fax # 587-0219	Fax # 586-4352

RESPONSE:

- [] This well qualifies as a source which will serve as a source of at least 60 days per year or has 15 or more service connections with Hawaii Administrative Rules (HAR), Title 11, Chapter 20,
- [] This well does not qualify as a source serving a public water system or 15 service connections) and if the well water is used for drinking water, the user shall eliminate cross-connections and backflow connections by physically separating potable and non-potable systems by an air gap or an approved backflow preventer, and by clearly labeling all non-potable spigots with warning signs to prevent inadvertent consumption of non-potable water. Backflow prevention devices should be routinely inspected and tested.
- [] If the well is used to supply both potable and non-potable purposes in a single system, the user shall eliminate cross-connections and backflow connections by physically separating potable and non-potable systems by an air gap or an approved backflow preventer, and by clearly labeling all non-potable spigots with warning signs to prevent inadvertent consumption of non-potable water. Backflow prevention devices should be routinely inspected and tested.
- [] It does not appear that this well will be used for consumptive purposes and is not subject to Safe Drinking Water Regulations.
- [] For the applicant's information, a source of possible wastewater contamination [] is [] is not located near the proposed well site (information attached).
- [] An NPDES permit is required.
- ☒ Other relevant DOH rules/regulations, information, or recommendations are attached.
- [] No comments/objections

Contact Person:

Alec Wong

Phone:

586 4309

Signed:

Alec Wong

Date:

10/10/01

010529

The Department of Health, Clean Water Branch has the following comments:

1. For Well-Drilling Activities

Any discharge to State waters of treated process wastewater effluent associated with well drilling activities is regulated by Hawaii Administrative Rules, Title 11, Chapter 55, Appendix I, effective September 22, 1997. Treated process wastewater effluent covered by this general permit includes well drilling slurries, lubricating fluids wastewaters, and well purge wastewaters. This general permit does not cover well pump testing. The applicable Notice of Intent Forms and filing fee shall be submitted at least thirty (30) days before the start of discharge to the Department of Health, Clean Water Branch at 919 Ala Moana Boulevard, Room 301, Honolulu, Hawaii 96814-4920 or P.O. Box 3378, Honolulu, Hawaii 96801-3378. Inquiries may be directed to the Clean Water Branch at (808) 586-4309 or by fax at (808) 586-4352.

2. For Well Pump Testing

The discharger shall take all measures necessary to prevent the discharge of pollutants from entering State waters. Such measures shall include, if necessary, containment of the initial discharge until the discharge is essentially free of pollutants. If the discharge is entering a stream or river bed, best management practices shall be implemented to prevent the discharge from disturbing the clarity of the receiving water. If the discharge is entering a storm drain, the discharger must obtain written permission from the owner of that storm drain prior to discharge. Furthermore, best management practices shall be implemented to prevent the discharge from collecting sediments and other pollutants prior to entering the storm drain.

JS/cr

Post-it Fax Note

7671

Date

10/10

pages

To	Charley Ice	From	Sharon Nekoba
Co./Dept.	CWRM	Co.	SDWB
Phone #	587-0251	Phone #	586-4268
Fax #	587-0219	Fax #	586-4370



RECEIVED
SAFE DRINKING WATER BRANCH

OCT 2 2001

OCT 9 2001

GILBERT S. COLOMA-AGARAN
Chairperson

BRUCE S. ANDERSON
ROBERT G. GERALD
BRIAN C. NISHIDA
DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.

LINNELL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

SEP 28 2001

TO: Honorable Bruce S. Anderson, Director
Department of Health
Attention: Dennis Tulang, Wastewater Branch
William Wong, Safe Drinking Water Branch
Dr. Keith Kawaoka, Hazardous Evaluation and Emergency Response
Alec Wong, Clean Water Branch

FROM: Gilbert S. Coloma-Agaran, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
EMWDP Monitor Well (Well No. 5418-01)

Transmitted for your review and comment is a copy of the captioned well application.

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. **Please respond by returning this cover memo form by October 12, 2001.** If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

Please find the attached maps to locate the proposed well. If you have any questions about this permit application, request additional information, or request additional review time, please contact Charley Ice of the Commission staff at 587-0251.

Cl:ky
Attachment(s)

RESPONSE:

- ☒ Given the size of this well, it would appear that this well qualifies as a source which will serve as a source of potable water to a public water system (defined as serving 25 or more people at least 60 days per year or has 15 or more service connections) and must receive Director of Health approval prior to its use to comply with Hawaii Administrative Rules (HAR), Title 11, Chapter 20, Rules Relating to Potable Water Systems, §11-20-29.
- ☐ This well does not qualify as a source serving a public water system (serves less than 25 people or more people at least 60 days per year or 15 service connections) and if the well water is used for drinking, the private owner should test for bacteriological and chemical presence before initiating such use and routinely monitor the water quality thereafter. However, if future planned use from this source increases to meet the public water system definition then Director of Health approval is required prior to implementation.
- ☐ If the well is used to supply both potable and non-potable purposes in a single system, the user shall eliminate cross-connections and backflow connections by physically separating potable and non-potable systems by an air gap or an approved backflow preventer, and by clearly labeling all non-potable spigots with warning signs to prevent inadvertent consumption of non-potable water. Backflow prevention devices should be routinely inspected and tested.
- ☐ It does not appear that this well will be used for consumptive purposes and is not subject to Safe Drinking Water Regulations.
- ☐ For the applicant's information, a source of possible wastewater contamination [] is [] is not located near the proposed well site (information attached).
- ☐ An NPDES permit is required.
- ☒ Other relevant DOH rules/regulations, information, or recommendations are attached.
- ☐ No comments/objections

Contact Person: Stuart Yamada

Phone: 586-4258

Signed:

Date: 10/10/01

6-5418-01 Maui

The Department of Health, Clean Water Branch has the following additional comments for the Well Construction Permit Application for the EWWDP Monitor Well (Well No. 6-5418-01 Maui):

For Well-Drilling Activities:

Any discharge to State waters of treated process wastewater effluent associated with well drilling activities is regulated by Hawaii Administrative Rules, Title 11, Chapter 55, Appendix I, effective September 1997. Treated process wastewater effluent covered by this general permit includes well drilling slurries, lubricating fluids wastewaters, and well purge wastewaters. This general permit does not cover well pump testing. The applicable Notice of Intent Forms and filing fee shall be submitted at least thirty (30) days before the start of discharge to the Department of Health, Clean Water Branch at 919 Ala Moana Boulevard, Room 301, Honolulu, Hawaii 96814-4290 or P.O. Box 3378, Honolulu, Hawaii 96801-3378. Inquiries may be directed to the Clean Water Branch at (808) 586-4309 or by fax at (808) 586-4352.

10/10/01

BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII



GILBERT S. COLOMA-AGARAN
CHAIRPERSON

BRUCE S. ANDERSON
ROBERT G. GIRALD
BRIAN C. NISHIDA
DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

SEP 28 2001

5 418-01.ack

Mr. David Craddick
Maui Department of Water Supply
200 South High Street
Wailuku, Maui, HI 96793

Dear Mr. Craddick:

Well Construction Permit Application for Well No. 5418-01

We acknowledge receipt, on September 12, 2001, of your completed Well Construction permit application and filing fee for the EMWDP Monitor Well (Well No. 5418-01). You can expect your application to be processed within ninety (90) days from this date.

We understand that the well will be constructed with a 24-inch borehole and possibly later converted to a production well. At that time, an environmental assessment and pump tests will be required.

For your information, the process of constructing a well is normally regulated and permitted in two (2) steps. First, a well construction permit is issued for drilling and testing purposes only. Based upon information provided by you through a Well Completion Report Part 1 (Well Construction), a pump installation permit (upon completed application) may then be issued to authorize pump work. If a pump is installed then a Well Completion Report Part 2 (Pump Installation) is required.

If you have any questions about your permit application, please contact Charley Ice of the Commission staff at 587-0251 or toll-free at 984-2400 extension 70251.

Sincerely,

A handwritten signature in dark ink, appearing to read "Linnel T. Nishioka".

LINNEL T. NISHIOKA
Deputy Director

Cl:ky

BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII



GILBERT S. COLOMA-AGARAN
CHAIRPERSON

BRUCE S. ANDERSON
ROBERT G. GIRALD
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DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

SEP 28 2001

TO: Honorable Bruce S. Anderson, Director
Department of Health
Attention: Dennis Tulang, Wastewater Branch
William Wong, Safe Drinking Water Branch
Dr. Keith Kawaoka, Hazardous Evaluation and Emergency Response
Alec Wong, Clean Water Branch

FROM: Gilbert S. Coloma-Agaran, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
EMWDP Monitor Well (Well No. 5418-01)

Transmitted for your review and comment is a copy of the captioned well application.

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. **Please respond by returning this cover memo form by October 12, 2001.** If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

Please find the attached maps to locate the proposed well. If you have any questions about this permit application, request additional information, or request additional review time, please contact Charley Ice of the Commission staff at 587-0251.

Cl:ky
Attachment(s)

RESPONSE:

- ☐ This well qualifies as a source which will serve as a source of potable water to a public water system (defined as serving 25 or more people at least 60 days per year or has 15 or more service connections) and **must** receive Director of Health approval **prior** to its use to comply with Hawaii Administrative Rules (HAR), Title 11, Chapter 20, Rules Relating to Potable Water Systems, §11-20-29.
- ☐ This well does not qualify as a source serving a public water system (serves less than 25 people or more people at least 60 days per year or 15 service connections) and if the well water is used for drinking, the private owner **should** test for bacteriological and chemical presence before initiating such use and routinely monitor the water quality thereafter. However, if future planned use from this source increases to meet the public water system definition then Director of Health approval is required **prior** to implementation.
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- ☐ It does not appear that this well will be used for consumptive purposes and is not subject to Safe Drinking Water Regulations.
- ☐ For the applicant's information, a source of possible wastewater contamination ☐ is ☐ is **not** located near the proposed well site (information attached).
- ☐ An NPDES permit is required.
- ☐ Other relevant DOH rules/regulations, information, or recommendations are attached.
- ☐ No comments/objections

Contact Person: _____

Phone: _____

Signed: _____

Date: _____

BENJAMIN J. CAYETANO
GOVERNOR OF HAWAII



GILBERT S. COLOMA-AGARAN
CHAIRPERSON

BRUCE S. ANDERSON
ROBERT G. GIRALD
BRIAN C. NISHIDA
DAVID A. NOBRIGA
HERBERT M. RICHARDS, JR.

LINNEL T. NISHIOKA
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P.O. BOX 621
HONOLULU, HAWAII 96809

SEP 28 2001

TO: Harry Yada, Acting Administrator
Land Division

FROM: Linnel T. Nishioka, Deputy Director
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
EMWDP Monitor Well (Well No. 5418-01)

A handwritten signature in dark ink, appearing to read "L. Nishioka".

Transmitted for your review and comment is a copy of the captioned well application which includes a request for a pump installation permit.

We would appreciate your comments on the captioned application with regard to the programs, plans, and objectives specific to your division. **Please respond by returning this cover memo form by October 12, 2001.** If we do not receive comments or a request for additional review time by this date, we will assume you have no comments.

Please find the attached maps to locate the proposed well. If you have any questions about this permit application, request additional information, or request additional review time, please contact Charley Ice of the Commission staff at 587-0251.

Cl:ky
Attachment(s) _____

RESPONSE:

- ☐ A water lease/permit is required of this applicant and an application for such will be requested by our division.
- ☐ A water lease/permit is not required of this applicant.
- ☐ A water lease/permit has been obtained by the applicant through lease no. _____.
- ☐ Other relevant Land Division rules/regulations, information, or recommendations are attached.
- ☐ No objections
- ☐ Other comments:

Contact Person: _____ Phone: _____

Signed: _____ Date: _____

Well Background Check

Approved Well No.	Well Name	Applicant	Driller	Type	Well Construction				Pump Installation			
					Issued	Signed	WCR1	Accept	Issued	Signed	WCR2	Accept
5118-02	Pookela Explorat	Maui DWS		WELL								
5731-03	Kupaa 1	Maui DWS [02]		PUMP								
5330-11	Mokuhao 3	Maui DWS [01]		PUMP							1/20/1998	1/20/1998
5418-01	EMWDP Monitor	Maui DWS	AC-05058	WELL								
10/14/1981	5431-04	Waihee 3	Maui DWS [01]	WELL	10/14/1981		12/23/1981					
9/8/1983	5108-01	Kearnae	Maui DWS [01]	WELL	9/8/1983		5/1/1984					
6/11/1984	4300-02	Hamoia	Maui DWS [01]	WELL	6/11/1984		12/13/1985					
8/18/1986	5938-01	Honokahua B	Maui DWS [01]	WELL	8/18/1986		1/15/1993					
4/14/1987	0801-03	Kualapuu Mauka	Maui DWS [01]	WELL	4/14/1987							
10/2/1990	5430-02	Waiehu Hts 2	Maui DWS [01]	PUMP					10/2/1990			
10/2/1990	5938-01	Honokahua B	Maui DWS [02]	PUMP					10/2/1990		1/15/1993	
7/29/1991	5420-02	Hamakuapoko I	Maui DWS [02]	WELL	7/29/1991		7/2/1992	7/2/1992				
7/29/1991	5320-01	Hamakuapoko 2	Maui DWS [02]	WELL	7/29/1991		6/10/1993	6/10/1993				
11/21/1991	4600-02	Wakiu A	Maui DWS [01]	PUMP					11/21/1991			
1/5/1993	5228-07	Reynolds 2	Maui DWS [01]	PUMP					1/5/1993		1/25/1993	
3/17/1993	5330-10	Mokuhau 2	Maui DWS [01]	PUMP					4/6/1993			
3/25/1993	5631-03	Waihee Valley 2	Maui DWS [01]	PUMP					3/25/1993		5/22/1997	5/22/1997
3/25/1993	5631-02	Waihee Valley 1	Maui DWS [01]	PUMP					3/25/1993		5/22/1997	5/22/1997
4/6/1993	5339-02	Waipuka 2	Maui DWS [01]	PUMP					4/6/1993		11/3/1999	11/3/1999
5/19/1993	5419-01	Haiku	Maui DWS [01]	PUMP							12/2/1996	12/2/1996
2/10/1994	5838-03	Honokahua A	Maui DWS [01]	PUMP					2/10/1994			
2/10/1994	5431-02	Waihee 1	Maui DWS [01]	PUMP					2/10/1994			
5/3/1994	0801-03	Kualapuu Mauka	Maui DWS [01]	PUMP					5/3/1994		3/23/1994	
1/20/1995	5339-01	Waipuka 1	Maui DWS [01]	PUMP					1/20/1995		5/17/1995	
12/6/1995	2902-02	Wahiawa II-2	Honolulu BWS [01]	BOTH	2/8/1996	2/20/1996	1/30/1997	1/30/1997	6/8/2000	8/7/2000	6/6/2001	6/6/2001
2/21/1996	4950-02	Big Island C C 2	Big Island C.C. Estates	PUMP					2/21/1996		6/16/1999	6/16/1999
2/18/1997	5332-05	Kepaniwai	Maui DWS [01]	PUMP					4/4/1997	4/16/1997	3/14/1997	3/14/1997

10/21/01

Please follow-up w/ Ryan.

no ltr of accept in file

6/16/1999

Approved Well No.	Well Name	Applicant	Driller	Type	Well Construction				Pump Installation			
					Issued	Signed	WCR1	Accept	Issued	Signed	WCR2	Accept
5/7/1997	4110-01	Saddle Road A	Hawaii DWS [01]	AC-05058	BOTH	5/9/1997	4/23/2001	6/25/1999	6/25/1999	9/5/2001	9/13/2001	
8/4/1997	2301-46	Waipahu IV-1	Honolulu BWS [01]	AC-05058	WELL	8/6/1997	1/21/1998	8/20/1998	8/20/1998			
8/4/1997	2301-44	Waipahu IV-2	Honolulu BWS [01]	AC-05058	WELL	8/6/1997	1/21/1998	8/20/1998	8/20/1998			
8/4/1997	2301-45	Waipahu IV-3	Honolulu BWS [01]	AC-05058	WELL	8/6/1997	1/21/1998	8/20/1998	8/20/1998			
9/19/1997	5131-01	Waikapu Mauka	Maui DWS [01]	AC-05058	BOTH	9/22/1997	8/10/1998	5/26/2000	9/26/2000	11/20/2000		
9/22/1997	5731-02	Kanoa 1	Maui DWS [02]	C-20115	WELL	9/24/1997	7/16/1998	7/6/1999	7/6/1999			
9/22/1997	5731-03	Kupaa 1	Maui DWS [02]	C-20115	WELL	9/24/1997	7/16/1998	6/23/1999	6/23/1999			
11/19/1997	2052-15	Kalihi Shaft Deep	Honolulu BWS [01]	AC-05058	WELL	11/20/1997	5/22/1998	11/29/1999	11/29/1999			
12/4/1997	4657-01	Kaupulehu 3	Hualalai Development Co.	AC-05058	BOTH	12/17/1997	7/10/1998	6/8/1999	1/28/2000	2/23/2000	3/1/2000	
7/15/1998	5108-02	Keanae 2	Maui DWS [02]	AC-22214	BOTH	7/16/1998	11/28/2000	12/26/2000	12/26/2000	1/16/2001		
2/12/1999	3857-04	Waiaha-DWS	Hawaii DWS	AC-05058	WELL	2/19/1999	3/6/2000	5/22/2001	6/18/2001			
5/21/1999	5419-01	Haiku	Maui DWS [01]		PUMP					5/26/1999	6/18/1999	7/8/1999 7/8/1999
7/20/1999	2987-01	Keonepoko Iki	Hawaii DWS	AC-05058	WELL	7/23/1999	3/1/2000	9/25/2000	7/9/2001			
8/26/1999	5731-04	Kanoa 2	Maui DWS [02]	C-20115	WELL	9/8/1999	2/22/2000	6/13/2000	7/19/2000			
9/27/1999	5731-02	Kanoa 1	Maui DWS [02]	AC-22214	PUMP					10/21/1999	4/19/2000	5/9/2001 5/9/2001
10/29/1999	5320-01	Hamakuapoko 2	Maui DWS [02]	C-21896	PUMP					11/26/1999	12/29/1999	8/22/1997 8/22/1997
10/29/1999	5420-02	Hamakuapoko I	Maui DWS [02]	C-21896	PUMP					11/26/1999	12/29/1999	8/22/1997 8/22/1997
9/20/2000	4856-02	Kaupulehu Irr 6	Hualalai Development Company	AC-05058	BOTH	10/18/2000	10/26/2000					
10/11/2000	2355-15	Kaamilo Deep Mo	Honolulu BWS [01]	AC-05058	WELL	10/17/2000	1/9/2001	7/19/2001	7/19/2001			
10/18/2000	5731-04	Kanoa 2	Maui DWS [2]	AC-22214	PUMP					11/8/2000	12/12/2000	
5/21/2001	1805-14	Kalaeloa Desalt 2	Honolulu BWS [01]	AC-05058	WELL	5/24/2001	6/1/2001					
5/21/2001	1805-13	Kalaeloa Desalt 1	Honolulu BWS [01]	AC-05058	WELL	5/24/2001	6/1/2001					
6/1/2001	1647-04	Kaimuki Explorat	State DLNR - Land Division	AC-05058	WELL	6/5/2001	6/8/2001					
6/1/2001	1647-05	Kaimuki Explorat	State DLNR - Land Division	AC-05058	WELL	6/5/2001	6/8/2001					

**COMMISSION ON WATER RESOURCE MANAGEMENT
ROUTE SLIP FOR NEW APPLICATIONS**

FROM: **CHARLEY**

DATE: **13-Aug-01**

SUSPENSE DATE: _____

TO: _____ INIT. _____

TO: _____ INIT. _____

FOR: _____

PLEASE: _____

1 HARDY, R. **RJ**

HIGA, D. **RJ**

HIRANO, E. _____
5 ICE, C. _____

IMATA, R. _____

JINNAI, R. _____

KUNIMURA, I. _____

3 NISHIOKA, L. **itk**
4 OHYE, M. **itk**

SAKODA, E. **itk**
2 SUBIA, S. **itk**

SWANSON, S. _____

UYENO, D. _____

YODA, K. _____

3 Approval
3 Signature
4 Information

See Me
1 Review & Comment
Take Action
5 Type Draft acknow letter
2 Type Final, label new file folder
5 File
Xerox _____ copies

WELL NUMBER **5418-01**

WELL NAME **EMWDP Monitor**

☒ WELL CONSTRUCTION

☐ PUMP INSTALLATION

☐ BOTH

ATTACHMENTS FOR APPLICATION PROCESSING - Both applicant & staff generated

- 1 TRANS. LETTER _____
- 2 CWRM MAP _____
- 3 APPL. FORM (3X) _____
- 4 USGS MAPS (3X) _____
- 5 TAX MAPS (3X) _____
- 6 PARCEL OWNER VERIF. _____
- 7 CONTRACTOR VERIF. _____
- 8 ALL INFO FILLED IN _____
- 9 BACKGROUND CHECK _____

MLS PRINTOUT :
DCCA LICENSE SCREEN PRINTOUT :

FOLDER:

☐ MADE NEW FILE FOLDER, ATTACHED
☐ FILE FOLDER ALREADY MADE, IN FILE CABINET

INCOMPLETE ACTION DATES:

DATE

ACTION

Who is the contracted driller? Is this the water use & development plan?

Legal requirements - left unanswered on application.

felcon 12 Sep 01:

#1 This project serves preparation of the Supplemental
EIS for EMWDP - so is a Catch-22. OEQC will call
back.
See attached printout from OEQC website (Guidelines on Exemptions)
Class 5: basic data collection, etc.

But well is 24", will be converted to production well,
may be monitoring in short-term. I don't think
this qualifies. If it's "exploratory" doesn't it still
require an EA? If they claim exemption, it needs
to be documented.

#2 Lenore & Ryan suggest we accept, as presented, with a
review by Dolt and special note in memo to require EA
at time of conversion to production (plus pump tests)
yes.

OEQC will
require.
When the pump
goes in - they
need EA. Just
a matter of timing.

? WRI license #?
AC 5058

Subject of the Report

11/11/11

1. The first part of the document is a list of names and addresses, which appears to be a directory or a list of contacts. The names are written in a cursive script, and the addresses are listed below them.



**DEPARTMENT OF WATER SUPPLY
COUNTY OF MAUI**

P.O. BOX 1109
WAILUKU, MAUI, HAWAII 96793-6109
TELEPHONE (808) 270-7816 • FAX (808) 270-7833 • www.mauewater.org

RECEIVED

01 JUL 27 P3:41

DEPARTMENT OF WATER
RESOURCES INTERNATIONAL

July 26, 2001

Ms. Linnel T. Nishioka, Deputy Director
Commission on Water Resource Management
Department of Land & Natural Resources
P.O. Box 621
Honolulu, Hawaii 96809

Dear Ms. Nishioka:

Subject: Monitor Well for SEIS for the East Maui Water Development Plan
TMK: (2) 2-7-008:008
Pauwela, Makawao, Maui

The Department desires to drill a monitor for the SEIS for the East Maui Water Development Plan on State owned land identified as TMK: (2) 2-7-008:008. A contract has been awarded to Water Resources International, Inc. to perform construction services.

We have enclosed two originals of the Well Construction permit for your approval. We understand that the filing fees are not required of our Department.

Should you have any questions, please feel free to call our Engineering Division at (808) 270-7835.

Sincerely,

David R. Craddick
Director

WKT
Enclosure

"By Water All Things Find Life"





State of Hawaii
COMMISSION ON WATER RESOURCE MANAGEMENT
Department of Land and Natural Resources
APPLICATION FOR PERMIT

☒ Well Construction and/or ☐ Pump Installation

Instructions: Please print in ink or type and send completed application with attachments to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. Application must be accompanied by 3 copies and a non-refundable filing fee of \$25.00 payable to the Dept. of Land and Natural Resources. The Commission may not accept incomplete applications. For assistance, call the Regulation Branch at 587-0225. For further information and updates to this application form, visit <http://www.state.hi.us/dlnr/cwrm>.

For Official Use Only:

RECEIVED

01 JUL 27 P3:41

COMMISSION ON WATER
RESOURCE MANAGEMENT

APPLICANT INFORMATION: (Fill out all three, if applicable, and place a check next to the primary contact)

1. (a) ☐ **WELL OWNER:** Maui County
Dept. of Water Supply Contact Person: David Craddick Phone: 808-270-7816
Mailing Address: 200 S. High St, Wailuku, Maui HI 96793
Fax: _____ E-mail: _____
- (b) ☐ **LAND OWNER:** State of Hawaii Contact Person: Jason K. Koga Phone: 984-8100
Mailing Address: Dept. of Land & Natural Resources, Land Division
54 S. High Street, Room 101, Wailuku, HI 96793
Fax: 984-8111 E-mail: _____
- (c) ☐ **CONTRACTOR:** Water Resources Int'l, Inc. Contact Person: _____ Phone: _____
Mailing Address: _____
Fax: _____ E-mail: _____ Lic #: A05058 telcon
(circle one: C-57, C-57a, or A) 175cp01

WELL & PUMP INFORMATION: (Please fill in the diagram on the back of this form.)

2. WELL NAME: East Maui Water Development Plan
Monitor Well Island: Maui
Address _____ Tax Map Key: 2 - 7 - 08 : 08
Zone Sec Plat Parcel
Attach the relevant portion of (a) a 7.5-Minute Series USGS topographic map (scale 1:24,000) and include the name of the quad map, and (b) a property tax map, showing well location referenced to established property boundaries.

3. PROPOSED WORK: ☒ Construct New Well ☐ Install New Pump*
(check all that apply) ☐ Modify Existing Well* ☐ Modify Pump*
☐ Abandon/Seal*
*State Well No.: _____ (if unknown, please call Commission at 587-0225)

4. CONSTRUCTION: ☒ Drilled ☐ Dug ☐ Shaft ☐ Tunnel
Is this well part of a battery of wells? ☐ Yes ☐ No (Please describe)

5. PROPOSED PUMP INFORMATION: Rated Pump Capacity: NA gallons per minute

Pump Type (Check one):

- ☐ Deep Well Turbine ☐ Rotary ☐ Propeller
☐ Submersible ☐ Rotary-Displacement ☐ Reciprocating
☐ Centrifugal ☐ Rotary-Gear ☐ Impulse

6. PROPOSED USE: ☐ Municipal (including hotels, stores, etc.) ☐ Industrial
(check all that apply) ☐ Domestic (individual, noncommercial water system)
Does this well serve 25 or more people at least 60 days per year or have 15 or more service connections? ☐ Yes ☐ No
☐ Irrigation (crop) _____ ☐ No. of Acres: _____
☐ Military ☒ Other (explain): Monitor Well

7. (a) PROPOSED AMOUNT OF WITHDRAWAL: _____ gallons per day
(b) METHOD OF FLOW MEASUREMENT: ☐ Flowmeter ☐ Open-pipe ☐ Weir ☐ Orifice ☐ Other(explain)

OTHER IMPORTANT INFORMATION:

8. LEGAL REQUIREMENTS: ☐ CDUP ☐ SMAP ☐ EIS ☐ EA ☐ None ☐ Other (explain)

9. REMARKS, EXPLANATIONS: _____

(if more space is needed, please attach additional sheet)

I understand that approval of this application attaches the following standard conditions: 1) the proposed work is to be completed within two (2) years of the approval date; 2) the contractor shall submit to the Commission a well completion/abandonment report within 60 days after the completion date of the permitted work; 3) monthly water use data shall be submitted to the Commission; 4) such approval shall not constitute a determination of correlative water rights and shall not guarantee the pump capacity or future use up to the permitted pump capacity.

Well Owner Maui Dept of Water
(print legibly) Supply

Signature [Signature]
Date 6/5/01

Landowner State of Hawaii
(print legibly)

Signature [Signature]
Date 7/16/01

Water Resources
Contractor International, Inc.
(print legibly)

Signature [Signature]
Date 7/23/01

For official use only

Latitude _____ Aquifer System No. _____
Longitude _____ State Well No. 5418-01

10. PROPOSED WELL SECTION (Please attach schematic if different from diagram provided below)
See attached Well Section

Hole Diameter: _____ in.

Elevation at top of casing _____ ft., msl*

Minimum of 2' Radius & 4" Thick Concrete Pad (to contain benchmark surveyed to nearest 0.01 ft.)

Ground Elevation: _____ ft., msl*

Please refer to the
**HAWAII WELL CONSTRUCTION AND
PUMP INSTALLATION STANDARDS**
to ensure that your as-built is in compliance
with applicable standards.

Cement Grout: _____ ft.
(min. 70% of distance from
ground elevation to top of
water surface or 500 ft.,
whichever is less.)

Annular space between
hole and casing (min. 3"):
_____ in.

Rock or Gravel Packing:
_____ ft.
Material:
☐ Crushed Basalt
☐ Rounded Gravel

Estimated Water Level
Elevation:
_____ ft. msl*

Total Depth
_____ ft.

Solid Casing: ($\geq 90\% \times (\text{Ground Elev.} - \text{Water Level Elev.})$)

Total Length: _____ ft.
Nominal Diameter: _____ in.
Wall Thickness: _____ in.
Bottom Elevation: _____ ft., msl*

Open Casing: ☐ Perforated ☐ Screen

Total Length: _____ ft.
Nominal Diameter: _____ in.
Wall Thickness: _____ in.
Bottom Elevation: _____ ft., msl*

note: Neither bentonite nor mud should be used in
saturated zone during drilling

Open Hole:

Length: _____ ft.
Diameter: _____ in.
Bottom Elevation: _____ ft., msl*

* The approximate elevation must be referenced to mean sea level (msl) at the time of application filing. Final elevations of well components shall be submitted in the Well Completion/Well Abandonment reports and referenced to a benchmark which has been established by a surveyor licensed by the State.

see following page
"Alternate Well Cross-Section"

For non-salt water Basal Wells - bottom elevation of well should not be deeper than 1/4 of aquifer thickness or,

$$\text{Bottom Elevation of Well Limit} = \left(\text{Water Elevation} - \frac{41 \times \text{Water Level Elevation}}{4} \right)$$

Example: Estimated + 2 ft. Water Level Elev. \rightarrow Bottom Elevation of Well Limit = $\left(2 - \frac{41 \times (2)}{4} \right) = -18.5 \text{ ft.}$

Solid Casing Material:

Carbon Steel: compliant with (check one or more): ☐ ANSI/AWWA C200 ☐ API Spec. 5L ☒ ASTM A53 ☐ ASTM A139
And compliant with (check one or more): ☐ ASTM A242 ☐ Type E ☐ Type S ☐ Grade B ☐ Other

Stainless Steel: (check one): ☐ ASTM A409 (production wells) ☐ ASTM A312 (monitor wells)

ABS Plastic conforming to ASTM F480 and ASTM D1527: (check one) ☐ Schedule 40 ☐ Schedule 80

PVC Plastic conforming to ASTM F480 and (ASTM D1785 or ASTM D2241): (check one): ☐ Schedule 40 ☐ Schedule 80 ☐ Schedule 120

Thermoset Plastic: (check one) ☐ Filament Wound Resin Pipe conforming to ASTM D2996
☐ Centrifugally Cast Resin Pipe conforming to ASTM D2997
☐ Reinforced Plastic Mortar Pressure Pipe conforming to ASTM D3517
☐ Glass Fiber Reinforced Resin Pressure Pipe conforming to AWWA C950
☐ PTFE Fluorocarbon Tubing conforming to ASTM D3296
☐ FEP Fluorocarbon Tubing conforming to ASTM D3296

Open Casing Material:

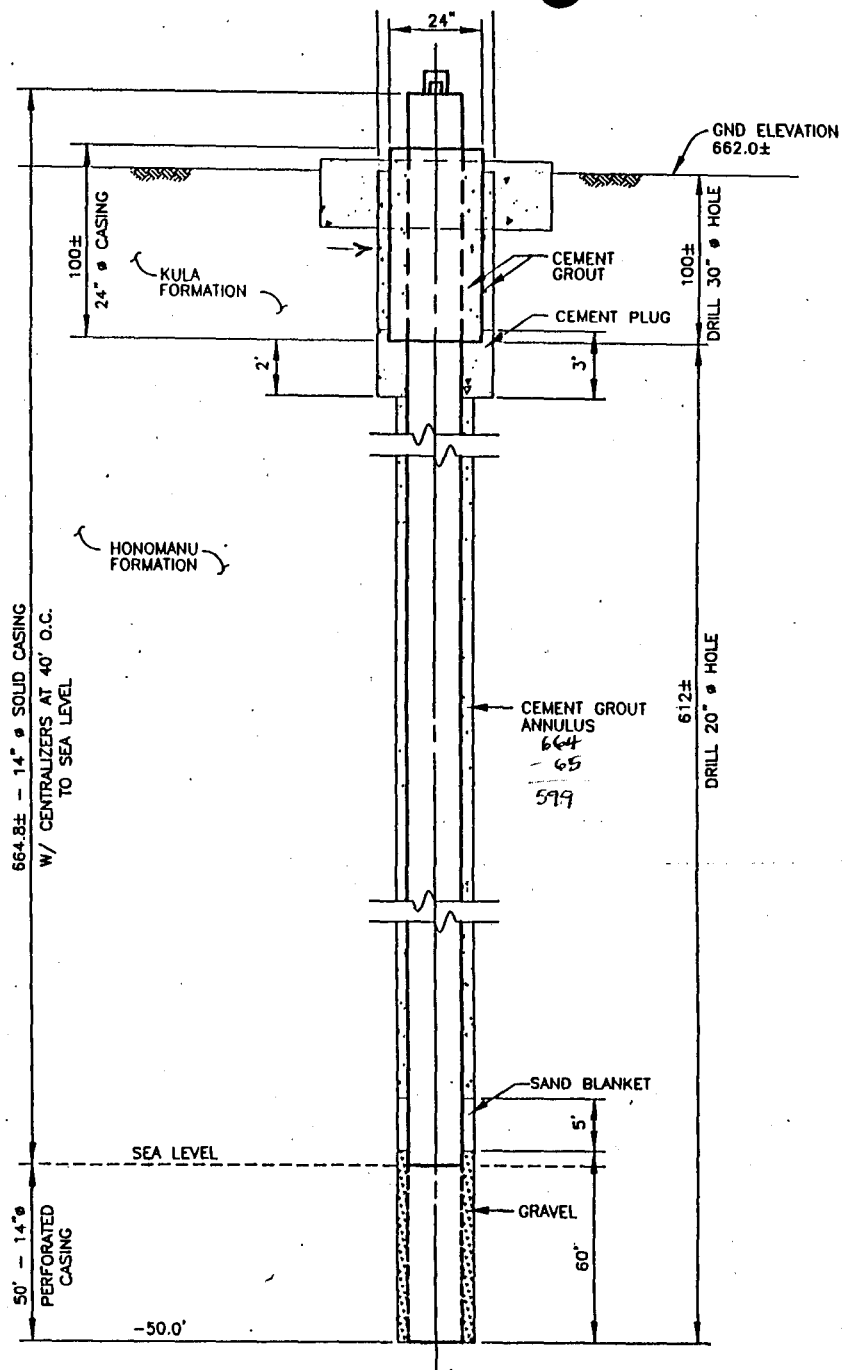
Carbon Steel: compliant with (check one or more): ☐ ANSI/AWWA C200 ☐ API Spec. 5L ☐ ASTM A53 ☒ ASTM A139
And compliant with (check one or more): ☐ ASTM A242 ☐ Type E ☐ Type S ☐ Grade B ☐ Other

Stainless Steel: (check one): ☐ ASTM A409 (production wells) ☐ ASTM A312 (monitor wells)

ABS Plastic conforming to ASTM F480 and ASTM D1527: (check one) ☐ Schedule 40 ☐ Schedule 80

PVC Plastic conforming to ASTM F480 and (ASTM D1785 or ASTM D2241): (check one): ☐ Schedule 40 ☐ Schedule 80 ☐ Schedule 120

Thermoset Plastic: (check one) ☐ Filament Wound Resin Pipe conforming to ASTM D2996
☐ Centrifugally Cast Resin Pipe conforming to ASTM D2997
☐ Reinforced Plastic Mortar Pressure Pipe conforming to ASTM D3517
☐ Glass Fiber Reinforced Resin Pressure Pipe conforming to AWWA C950
☐ PTFE Fluorocarbon Tubing conforming to ASTM D3296
☐ FEP Fluorocarbon Tubing conforming to ASTM D3296



ALTERNATE WELL CROSS SECTION OF
PROPOSED MONITOR WELL
EAST MAUI SE1S

160

Croy H. Kalos - 1/6
 Jeremiah Kalos - 1/6
 Mary K. Bahas - 1/6
 Ruth Katanais - 1/6
 John H. Kalos - 1/6
 Dorothy Oliver - 1/6
 L.C. Av. 457:5
 0.39 ac.

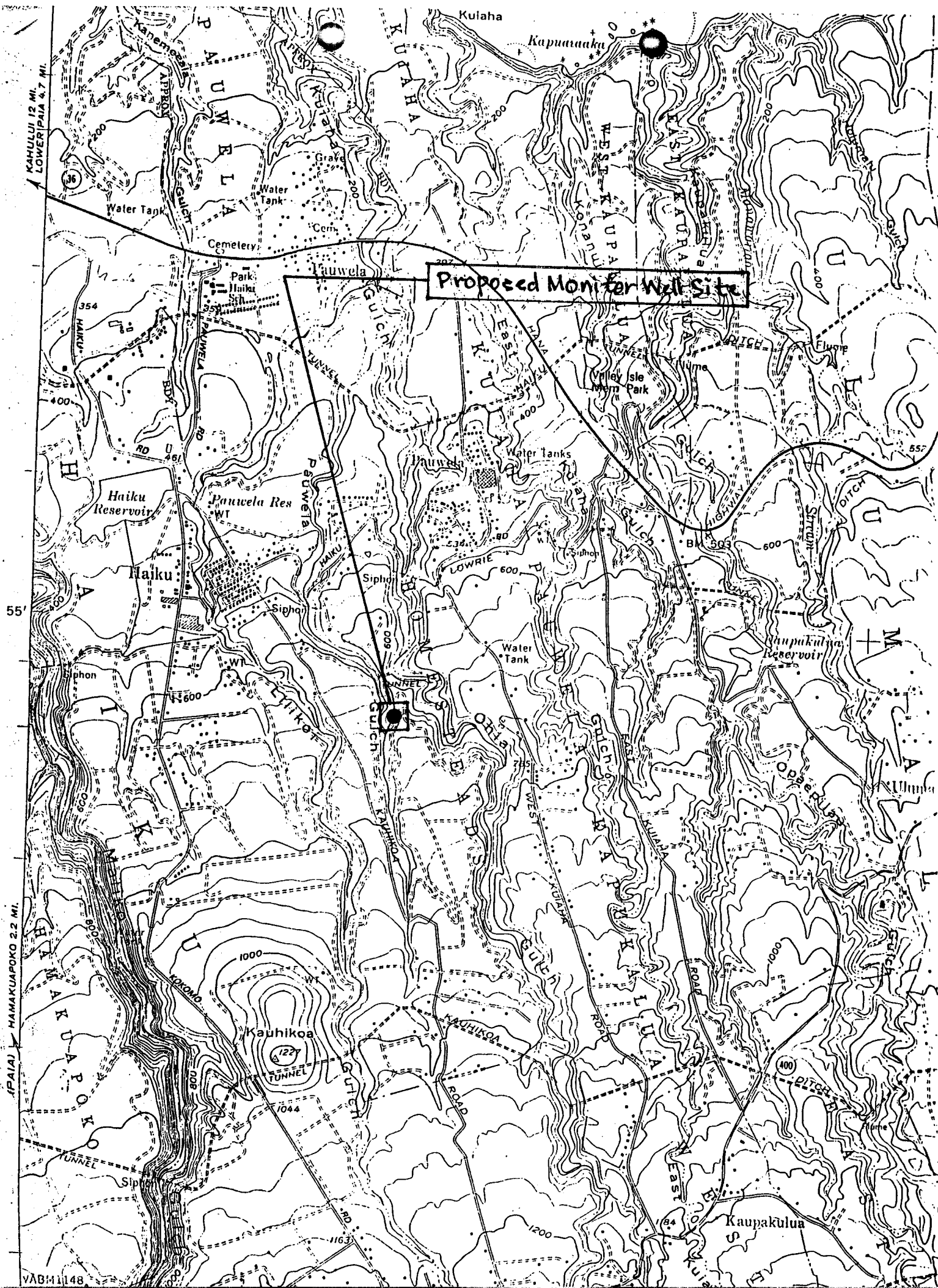
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 319 - 12/25
 320 - 1/26
 321 - 2/26
 322 - 3/26

Proposed Monitor Well Site
TMK 2-7-00:00

Notes: Parcels 166 to 172 incl. owned by
Kimberly K. Ball & Craig J.
Maisonville - T/C unless
otherwise noted.

Note: Parcel 5, 173-176 owned
by Gregg Blue Trust - vs,
Richard B. Cook - vs,
Francis E. Skowronski - vs.
-T/C
4. Estle L. Middleton, Jr.
Kathleen S. - T/C

Owners of Parcel 106
Richard T. Tajiri and Helen H. Jay





State of Hawaii
COMMISSION ON WATER RESOURCE MANAGEMENT
Department of Land and Natural Resources
APPLICATION FOR PERMIT

☒ Well Construction and/or ☐ Pump Installation

Instructions: Please print in ink or type and send completed application with attachments to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. Application must be accompanied by 3 copies and a non-refundable filing fee of \$25.00 payable to the Dept. of Land and Natural Resources. The Commission may not accept incomplete applications. For assistance, call the Regulation Branch at 587-0225. For further information and updates to this application form, visit <http://www.state.hi.us/dlnr/cwrm>.

For Official Use Only:

RECEIVED

01 JUL 27 P3:41

COMMISSION ON WATER
RESOURCE MANAGEMENT

APPLICANT INFORMATION: (Fill out all three, if applicable, and place a check next to the primary contact)

1. (a) ☐ **WELL OWNER:** Maui County Dept. of Water Supply Contact Person: David Craddick Phone: 808-270-7816
Mailing Address: 200 S. High St, Wailuku, Maui HI 96793
Fax: _____ E-mail: _____
- (b) ☐ **LAND OWNER:** State of Hawaii Contact Person: Jason K. Koga Phone: 984-8100
Mailing Address: Dept. of Land & Natural Resources, Land Division
54 S. High Street, Room 101, Wailuku, HI 96793
Fax: 984-8111 E-mail: _____
- (c) ☐ **CONTRACTOR:** _____ Contact Person: _____ Phone: _____
Mailing Address: _____
Fax: _____ E-mail: _____ Lic #: _____
(circle one: C-57, C-57a, or A)

WELL & PUMP INFORMATION: (Please fill in the diagram on the back of this form.)

2. WELL NAME: East Maui Water Development Plan Monitor Well Island: Maui
Address _____ Tax Map Key: 2 - 7 - 08 : 08
Zone Sec Plat Parcel

Attach the relevant portion of (a) a 7.5-Minute Series USGS topographic map (scale 1:24,000) and include the name of the quad map, and (b) a property tax map, showing well location referenced to established property boundaries.

3. PROPOSED WORK: ☒ Construct New Well ☐ Install New Pump*
(check all that apply) ☐ Modify Existing Well* ☐ Modify Pump*
☐ Abandon/Seal*
*State Well No.: _____ (if unknown, please call Commission at 587-0225)

4. CONSTRUCTION: ☒ Drilled ☐ Dug ☐ Shaft ☐ Tunnel
Is this well part of a battery of wells? ☐ Yes ☐ No (Please describe)

5. PROPOSED PUMP INFORMATION: Rated Pump Capacity: NA gallons per minute

Pump Type (Check one):

- ☐ Deep Well Turbine ☐ Rotary ☐ Propeller
☐ Submersible ☐ Rotary-Displacement ☐ Reciprocating
☐ Centrifugal ☐ Rotary-Gear ☐ Impulse

6. PROPOSED USE: ☐ Municipal (including hotels, stores, etc.) ☐ Industrial
(check all that apply) ☐ Domestic (individual, noncommercial water system)
Does this well serve 25 or more people at least 60 days per year or have 15 or more service connections? ☐ Yes ☐ No
☐ Irrigation (crop) _____ ☐ No. of Acres: _____
☐ Military ☒ Other (explain): Monitor Well

7. (a) PROPOSED AMOUNT OF WITHDRAWAL: _____ gallons per day
(b) METHOD OF FLOW MEASUREMENT: ☐ Flowmeter ☐ Open-pipe ☐ Weir ☐ Orifice ☐ Other(explain)

OTHER IMPORTANT INFORMATION:

8. LEGAL REQUIREMENTS: ☐ CDUP ☐ SMAP ☐ EIS ☐ EA ☐ None ☐ Other (explain)

9. REMARKS, EXPLANATIONS: _____
(if more space is needed, please attach additional sheet)

I understand that approval of this application attaches the following standard conditions: 1) the proposed work is to be completed within two (2) years of the approval date; 2) the contractor shall submit to the Commission a well completion/abandonment report within 60 days after the completion date of the permitted work; 3) monthly water use data shall be submitted to the Commission; 4) such approval shall not constitute a determination of correlative water rights and shall not guarantee the pump capacity or future use up to the permitted pump capacity.

Well Owner Maui Dept of Water Supply
(print legibly)
Signature [Signature]
Date 6/27/01

Landowner State of Hawaii
(print legibly)
Signature [Signature]
Date 7/16/01

Water Resources
Contractor International, Inc.
(print legibly)
Signature [Signature]
Date 7/23/01

For official use only

Latitude _____ Aquifer System No. _____
Longitude _____ State Well No. 5418-01

10. PROPOSED WELL SECTION (Please attach schematic if different from diagram provided below)
See attached Well Section

Hole Diameter: _____ in.

Elevation at top of casing _____ ft., msl*

Minimum of 2' Radius & 4" Thick Concrete Pad (to contain benchmark surveyed to nearest 0.01 ft.)
Ground Elevation: _____ ft., msl*

Please refer to the
**HAWAII WELL CONSTRUCTION AND
PUMP INSTALLATION STANDARDS**
to ensure that your as-built is in compliance
with applicable standards.

Cement Grout: _____ ft.
(min. 70% of distance from
ground elevation to top of
water surface or 500 ft.,
whichever is less.)

Annular space between
hole and casing (min. 3"):
_____ in.

Rock or Gravel Packing:
_____ ft.
Material:
☐ Crushed Basalt
☐ Rounded Gravel

Estimated Water Level
Elevation:
_____ ft. msl*

Total Depth
_____ ft.

≥ 90% x (Ground Elev. - Water Level Elev)

Solid Casing: (≥ 90% x (Ground Elev. - Water Level Elev))
Total Length: _____ ft.
Nominal Diameter: _____ in.
Wall Thickness: _____ in.
Bottom Elevation: _____ ft., msl*

Open Casing: ☐ Perforated ☐ Screen
Total Length: _____ ft.
Nominal Diameter: _____ in.
Wall Thickness: _____ in.
Bottom Elevation: _____ ft., msl*
note: Neither bentonite nor mud should be used in
saturated zone during drilling

Open Hole:
Length: _____ ft.
Diameter: _____ in.
Bottom Elevation: _____ ft., msl*

* The approximate elevation must be referenced to mean sea level (msl) at the time of application filing. Final elevations of well components shall be submitted in the Well Completion/Well Abandonment reports and referenced to a benchmark which has been established by a surveyor licensed by the State.

For non-salt water Basal Wells - bottom elevation of well should not be deeper than 1/4 of aquifer thickness or,

$$\text{Bottom Elevation of Well Limit} = \left(\text{Water Elevation} - \frac{41 \times \text{Water Level Elevation}}{4} \right)$$

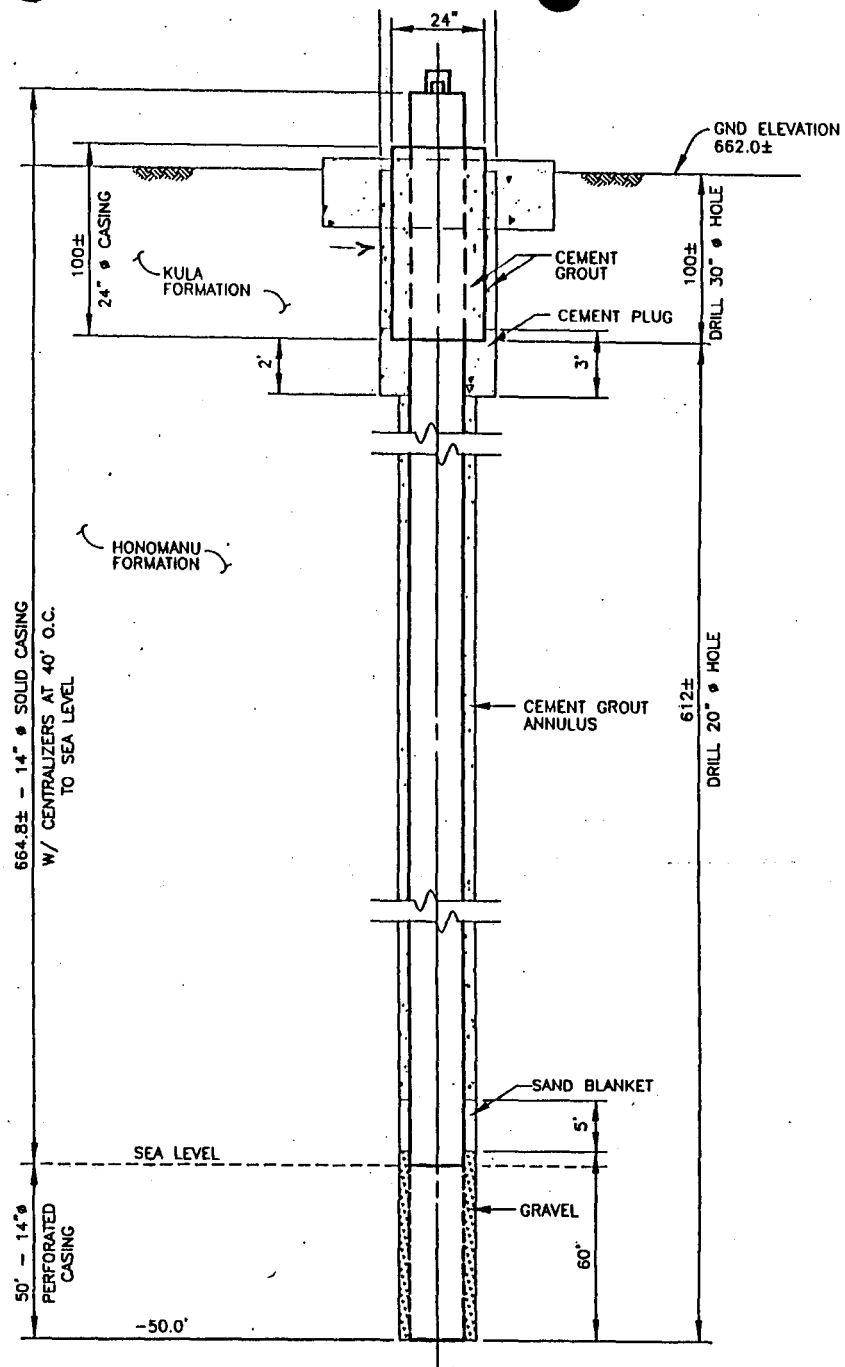
Example: Estimated + 2 ft. Water Level Elev. → Bottom Elevation of Well Limit = $\left(2 - \frac{41 \times (2)}{4} \right) = -18.5 \text{ ft.}$

Solid Casing Material:

- Carbon Steel:** compliant with (check one or more): ☐ ANSI/AWWA C200 ☐ API Spec. 5L ☒ ASTM A53 ☐ ASTM A139
And compliant with (check one or more): ☐ ASTM A242 ☐ Type E ☐ Type S ☐ Grade B ☐ Other
- Stainless Steel:** (check one): ☐ ASTM A409 (production wells) ☐ ASTM A312 (monitor wells)
- ABS Plastic** conforming to ASTM F480 and ASTM D1527: (check one) ☐ Schedule 40 ☐ Schedule 80
- PVC Plastic** conforming to ASTM F480 and (ASTM D1785 or ASTM D2241): (check one): ☐ Schedule 40 ☐ Schedule 80 ☐ Schedule 120
- Thermoset Plastic:** (check one) ☐ Filament Wound Resin Pipe conforming to ASTM D2996
☐ Centrifugally Cast Resin Pipe conforming to ASTM D2997
☐ Reinforced Plastic Mortar Pressure Pipe conforming to ASTM D3517
☐ Glass Fiber Reinforced Resin Pressure Pipe conforming to AWWA C950
☐ PTFE Fluorocarbon Tubing conforming to ASTM D3296
☐ FEP Fluorocarbon Tubing conforming to ASTM D3296

Open Casing Material:

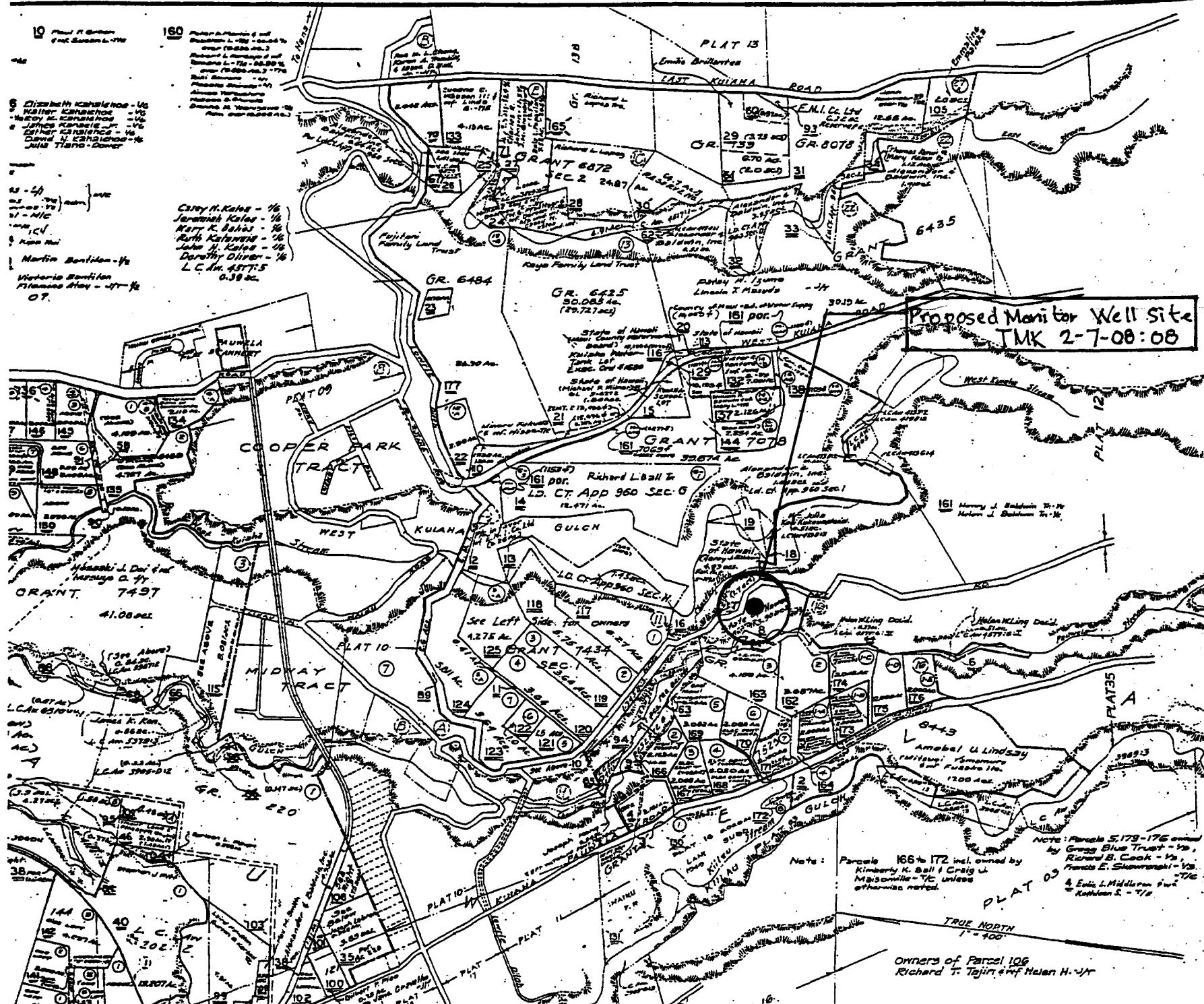
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☐ PTFE Fluorocarbon Tubing conforming to ASTM D3296
☐ FEP Fluorocarbon Tubing conforming to ASTM D3296



ALTERNATE WELL CROSS SECTION OF
PROPOSED MONITOR WELL
 EAST MAUI SE13



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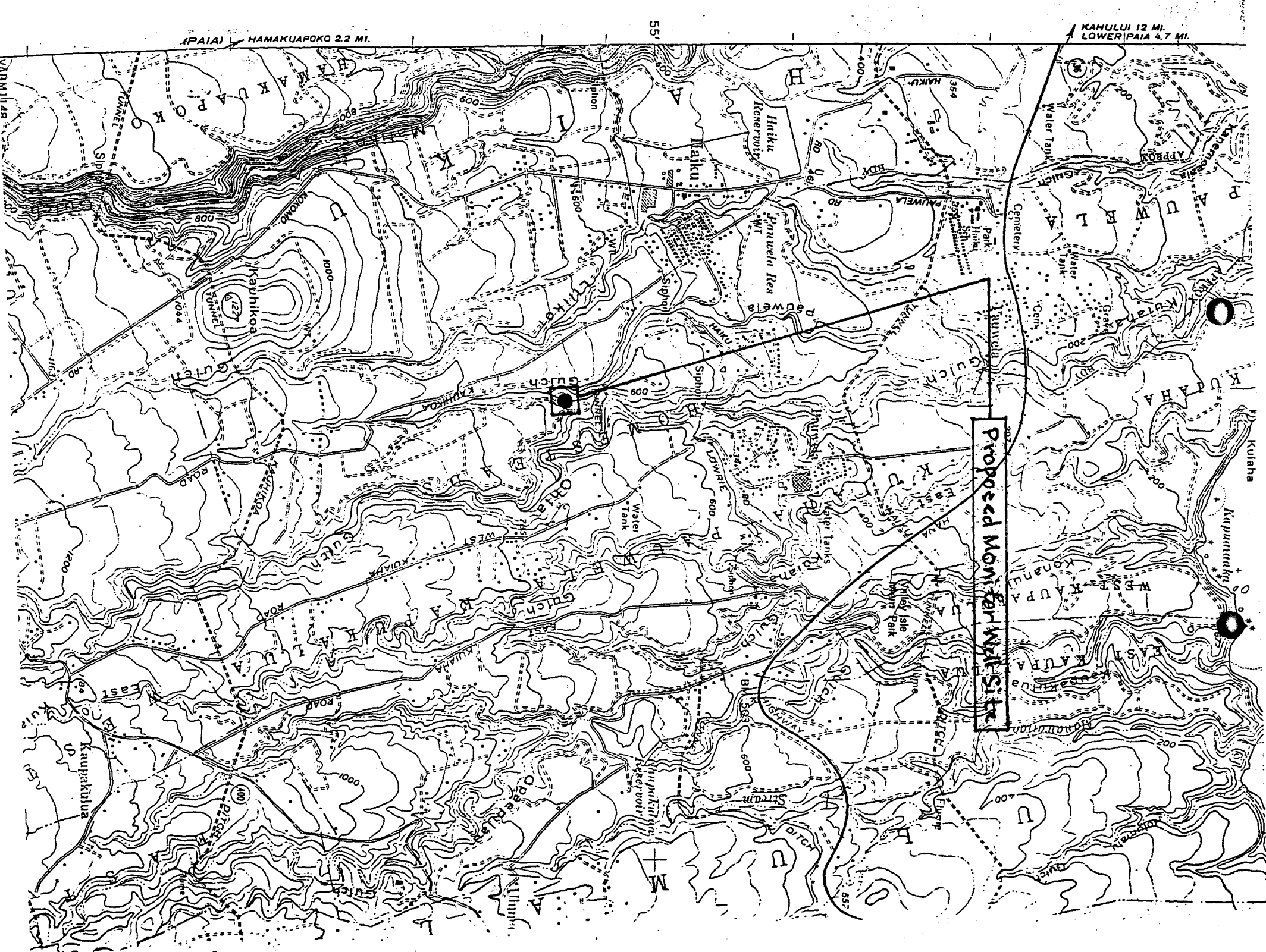
Proposed Monitor Well Site
TMK 2-7-08:08

Notes: Parcels 166 to 172 incl. owned by
Kimberly K. Bell & Craig J.
Maisonville - T/C unless

Note: Parcel 5, 179-176 owned
by Gregg Blue Trust - 1/2,
Richard B. Cook - 1/2,
Francis E. Skowronski - 1/2.
4 Eric L. Middleton paid
\$ 1000.00 - 1/2

Owners of Parcel 106
Richard T. Tajiri and Helen H. Tajiri





(PAIA) HAMAKUPOKO 2.2 MI.

KAHULUI 12 MI. LOWER PAIA 4.7 MI.

Proposed Monitor Well Site

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Well Background Check

Approved Well No.	Well Name	Applicant	Driller	Type	Well Construction				Pump Installation			
					Issued	Signed	WCR1	Accept	Issued	Signed	WCR2	Accept
STATUS?	5118-02	Pookela Explorat	Maui DWS	WELL								
5731-03	Kupaa 1	Maui DWS [02]		PUMP								
5418-01	EMWDP Monitor	Maui DWS		WELL								
5330-11	Mokuhao 3	Maui DWS [01]		PUMP							1/20/1998	1/20/1998
10/14/1981	5431-04	Waihee 3	Maui DWS [01]	WELL	10/14/1981			12/23/1981				
9/8/1983	5108-01	Kearae	Maui DWS [01]	WELL	9/8/1983			5/1/1984				
6/11/1984	4300-02	Hamo	Maui DWS [01]	WELL	6/11/1984			12/13/1985				
8/18/1986	5938-01	Honokahua B	Maui DWS [01]	WELL	8/18/1986			1/15/1993				
4/14/1987	0801-03	Kualapuu Mauka	Maui DWS [01]	WELL	4/14/1987							
10/2/1990	5430-02	Waiehu Hts 2	Maui DWS [01]	PUMP					10/2/1990			
10/2/1990	5938-01	Honokahua B	Maui DWS [02]	PUMP					10/2/1990		1/15/1993	
7/29/1991	5320-01	Hamakuapoko 2	Maui DWS [02]	WELL	7/29/1991			6/10/1993	6/10/1993			
7/29/1991	5420-02	Hamakuapoko I	Maui DWS [02]	WELL	7/29/1991			7/2/1992	7/2/1992			
11/21/1991	4600-02	Wakiu A	Maui DWS [01]	PUMP					11/21/1991			
1/5/1993	5228-07	Reynolds 2	Maui DWS [01]	PUMP					1/5/1993		1/25/1993	
3/17/1993	5330-10	Mokuhau 2	Maui DWS [01]	PUMP					4/6/1993			
3/25/1993	5631-02	Waihee Valley 1	Maui DWS [01]	PUMP					3/25/1993		5/22/1997	5/22/1997
3/25/1993	5631-03	Waihee Valley 2	Maui DWS [01]	PUMP					3/25/1993		5/22/1997	5/22/1997
4/6/1993	5339-02	Waipuka 2	Maui DWS [01]	PUMP					4/6/1993		11/3/1999	11/3/1999
5/19/1993	5419-01	Haiku	Maui DWS [01]	PUMP							12/2/1996	12/2/1996
2/10/1994	5838-03	Honokahua A	Maui DWS [01]	PUMP					2/10/1994			
2/10/1994	5431-02	Waihee 1	Maui DWS [01]	PUMP					2/10/1994		2/10/1994	
5/3/1994	0801-03	Kualapuu Mauka	Maui DWS [01]	PUMP					5/3/1994		3/23/1994	
1/20/1995	5339-01	Waipuka 1	Maui DWS [01]	PUMP					1/20/1995		5/17/1995	
2/18/1997	5332-05	Kepaniwai	Maui DWS [01]	PUMP					4/4/1997	4/16/1997	3/14/1997	3/14/1997
9/19/1997	5131-01	Waikapu Mauka	Maui DWS [01]	BOTH	9/22/1997	8/10/1998	5/26/2000	9/26/2000	11/20/2000			
9/22/1997	5731-03	Kupaa 1	Maui DWS [02]	WELL	9/24/1997	7/16/1998	6/23/1999	6/23/1999				

Anything missing?
If not can we?

Approved Well No.	Well Name	Applicant	Driller	Type	Well Construction				Pump Installation			
					Issued	Signed	WCR1	Accept	Issued	Signed	WCR2	Accept
9/22/1997	5731-02	Kanoa 1	Mauī DWS [02]	C-20115	WELL	9/24/1997	7/16/1998	7/6/1999	7/6/1999			
7/15/1998	5108-02	Keanae 2	Mauī DWS [02]	AC-22214	BOTH	7/16/1998	11/28/2000	12/26/2000	12/26/2000	1/16/2001		
5/21/1999	5419-01	Haiku	Mauī DWS [01]		PUMP					5/26/1999	6/18/1999	7/8/1999 7/8/1999
8/26/1999	5731-04	Kanoa 2	Mauī DWS [02]	C-20115	WELL	9/8/1999	2/22/2000	6/13/2000	7/19/2000			
9/27/1999	5731-02	Kanoa 1	Mauī DWS [02]	AC-22214	PUMP					10/21/1999	4/19/2000	5/9/2001 5/9/2001
10/29/1999	5320-01	Hamakuapoko 2	Mauī DWS [02]	C-21896	PUMP					11/26/1999	12/29/1999	8/22/1997 8/22/1997
10/29/1999	5420-02	Hamakuapoko I	Mauī DWS [02]	C-21896	PUMP					11/26/1999	12/29/1999	8/22/1997 8/22/1997
10/18/2000	5731-04	Kanoa 2	Mauī DWS [2]	AC-22214	PUMP					11/8/2000	12/12/2000	

(7)

Mink & Yuen, Inc.

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March 6, 2001

Elmer F. Cravalho
Chairman, Board of Water Supply
County of Maui
PO Box 1109
Wailuku HI 96793-6109

Subject: EMWDP SEIS Monitor well.

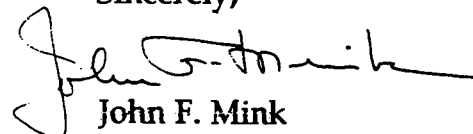
Dear Chairman Cravalho:

The Court Order of September, 2000, stipulates that a monitor well must be located in the Haiku region at one of the sites which had been suggested by W. Meyer, now retired but formerly District Chief WRD USGS, Hawaii. The site has been selected on State property adjacent to Hogback Road between Ohia and Pauwela Gulches.

The diameter of the casing that will reach into the Honomanu aquifer, the principal groundwater resource in the region, has yet to be decided. Either an eight or fourteen inch diameter casing has been recommended. Both casing sizes will allow collection of basic data such as lithology, water level measurements, and water quality. However, if the yield of the aquifer is to be tested, the smaller diameter casing will limit pump capacity to about 350 gpm, but the larger diameter will allow testing to about 1200 gpm. The higher pump rate will provide more accurate estimates of aquifer parameters and will more likely satisfy the proposal to test for pumping effects on potential stream flow.

Please let us know the casing size for which the specifications need to be drafted.

Sincerely,


John F. Mink
Vice President

East Maui

Haiku

92-05

11/20/99

WELL NUMBER: 59128-009

6-5418-01 EMUDD MONITOR

DRILLER'S LOG (7/26/99 DL Form)

Depths (ft.)	Rock Description, Water Level, etc.	Dates	Depths (ft.)	Rock Description, Water Level, etc.	Dates
8' to 90'	very soft	10-3	250 to 338	med	11-7
90 to 93'	med Hard	10-4	336 to 339	Puka	11-7
93' to 100	very soft	10-5	339 to 343	med	11-7
100 to 132	med Hard	10-8	343 to 355	soft	11-7
132 to 139	Soft	10-8	355 to 360	med	11-7
139 to 143	med Hard	10-9	360' to 369'	Fractured	11-8
143 to 150	Hard	10-10	369 to 428	Hard	11-8
150 to 158	Soft	10-30	428 to 434	soft	11-11/9
158 to 164	med hard	10-30	434 to 470	Hard	11-9
164 to 172	Hard	10-30	470 to 476	soft	11-13
172 to 175	med Hard	10-30	476 to 570	Hard	11-13
175 to 179	Hard	10-30	570 to 578	very hard	11-15
179 to 181	med Hard	10-30	578 to 624	med	11-15
181 to 187	Very hard	10-30	624 to 626	Fractured soft	11-16
187 to 189	med hard	10-31	626 to 658	med	11-16
189' to 214	soft	10-31	658 to 684'	Hard	11-19
214 to 240	med	10-31	684 to 690	Fractured soft	11-20
240 to 250	Hard	10-31	690 to 715	Hard	11-20

Remarks: Sea Level @ 667' G.L.

Run solinst @ 674' No Fluids Rotary Depth

WELL NUMBER: 5418-01

6-5418-01 EMVDP Monitor

DRILLER'S LOG (7/26/99 DL Form)

[illegible][illegible]

Remarks: