**COMMISSION ON WATER RESOURCE MANAGEMENT**

**ROUTE SLIP FOR PERMIT ISSUANCE 1/22/10**

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<td>KAWAHARA, K.</td>
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<td>KIMURA, J</td>
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**WELL NUMBER** 3686-32  
**WELL NAME** *Thy Well Be Done*

### Application Type
- **WCP COVER LETTER** ✓
- **WCP** ✓
- **WELL CHECK PRINTOUT** ✓
- **proposed well section issues?** ✓
- **PIP COVER LETTER** ➡
- **PIP** ✗

**COMMENTS:**

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<td>BWS (Oahu)</td>
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**NOTES:**

**DRILLER**
- Rod Diamond
- Diamond Construction and Water Well Drilling
- 23379 HCR#3 Box 14073
- Keeau, HI 96749
- Phone 966-4129
- Fax 966-4129
- Cell 987-8100

**TMK**
- 1-5-057:061

**PUMP CAPACITY**
- 16

**WELL OWNER**
- La Chance Trust

**LAND OWNER**
- La Chance Trust

**COMMENT DEADLINE**
- 4/25/10
Mr. Rod Diamond
Diamond Construction and Water Well Drilling
HCR#3 Box 14073
Keeau, HI 96749

Dear Mr. Diamond:

Pump Installation Permit
Thy Well Be Done Well (Well No. 3686-32)

Enclosed are two (2) originals of your approved Pump Installation Permit for the captioned well(s) that authorize permanent pump installation work for your well(s). As part of the Chairperson's approval, the following special conditions were added and are part of your permit under Permit Condition 14:

Special Conditions

1. If the elevation benchmark needs to be altered, the permittee, well operator, and/or well owner shall ensure that the benchmark is transferred (or the well resurveyed) and documentation of the new benchmark shall be submitted to the Commission within sixty (60) days after the pump is installed.

The permittee is responsible for all conditions of the permit. This includes ensuring the submission of a completed Well Completion Report Part II form within sixty (60) days after the pump installation work is completed. Be advised that you may be subject to fines of up to $5,000 per day for any violations of your permit conditions starting from the permit approval date.

Please sign both permit originals and return one copy to the Commission office for our files.

IMPORTANT - Pump installation shall not commence until a fully signed permit is returned to the Commission.

If you have any questions, please call Ryan Imata of the Commission staff at 587-0255 or toll-free at 974-4000 (Hawaii), 274-3141 (Kauai), 984-2400 (Maui), or 1-800-468-4644 (Lanai & Molokai), extension 70255.

Sincerely,

LAURA H. THIELEN
Chairperson

Enclosure

c: La Chance Trust
USGS
Hawaii DWS
PUMP INSTALLATION PERMIT
Thy Well Be Done Well, Well No. 3686-32

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 pump installation for Thy Well Be Done Well (Well No. 3686-32) at TMK 1-5-057:061, Hawaii, subject to the Hawaii Well Construction & Pump Installation Standards (HWCPIS - February 2004) which include but are not limited to the following conditions:

1. The Chairperson to 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 covered by this permit commences and staff shall be allowed to inspect installation activities in accordance with §13-168-15, Hawaii Administrative Rules (HAR).

2. No withdrawal of water shall be made other than for testing until a Certificate of Pump Installation Completion has been issued by the Commission.

3. This permit shall be prominently displayed, or made available, at the site of construction work until work is completed.

4. The pump installation permit shall be for installation of a 16 gpm rated capacity, or less, pump in the well. This permanent capacity may be reduced in the event that the pump test data does not support the capacity.

5. A water-level measurement access shall be permanently installed, in a manner acceptable to the Chairperson, to accurately record water levels.

6. The permittee shall install an approved meter or other appropriate means for measuring and reporting withdrawals and appropriate devices or means for measuring chlorides and temperature at the well head.

7. Well Completion Report Part II shall be submitted to the Chairperson within sixty (60) days after completion of work (please contact staff or visit www.hawaii.gov/dlnr/cwrm/resources_permits.htm for current form).

8. The permittee, well operator, and/or well owner shall comply with all applicable laws, rules, and ordinances, and non-compliance may be grounds for revocation of this permit.

9. The pump installation permit application and, if relevant, any related staff submittal approved by the Commission are incorporated into this permit by reference.

10. If the HWCPIS are not followed and as a consequence water is wasted or contaminated, a lien on the property may result.

II. Any variances from the HWCPIS shall be approved by the Chairperson prior to invoking the variance.

12. The work proposed in the pump installation 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 the date the permit expires.

13. 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.

14. Special conditions in the attached cover transmittal letter are incorporated herein by reference.

Date of Approval: May 5, 2010
Expiration Date: May 5, 2012

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 pump installer have signed, dated, and returned the permit to the Commission. I understand that this permit is not to be transferred to any other entity. I also understand that non-compliance with any permit condition may be grounds for revocation and fines of up to $5,000 per day starting from the permit date of approval.

Installer's Signature: ___________________________ C-57, C-57a, or A License #: BC-23379 Date:
Printed Name: Rod Diamond Firm or Title: Diamond Construction and Water Well Drilling

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

Attachments
Mr. Rod Diamond
Diamond Construction and Water Well Drilling
HCR#3 Box 14073
Keeau, HI 96749

Dear Mr. Diamond:

Well Construction Permit
Thy Well Be Done Well (Well No. 3686-32)

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 a permanent pump. As part of the Chairperson's approval, the following special conditions were added and are part of your permit under Permit Condition 17:

Special Conditions

1. None

Please refer to the Permit Processes Worksheet (transmitted with your acknowledgement letter) for further information regarding the process of drilling a well and installing a pump.

No withdrawal of water shall be made other than for testing purposes until a certificate of pump installation completion has been issued by the Commission.

Please sign both permit originals and return one copy to the Commission office for our files. For copies of the aquifer pump test worksheet, please call staff or visit www.state.hi.us/dlnr/cwrm/forms.htm.

IMPORTANT - Drilling work shall not commence until a fully signed permit is returned to the Commission. The permit shall be prominently displayed or made available at the construction site during construction. Be advised that you may be subject to fines of up to $5,000 per day for any violations of your permit conditions starting from the permit approval date.

If you have any questions, please call Ryan Imata of the Commission staff at 587-0255 or toll-free at 974-4000 (Hawaii), 274-3141 (Kauai), 984-2400 (Maui), or 1-800-468-4644 (Lanai & Molokai), extension 70255.

Sincerely,

Laura H. Thielen
Chairperson

Enclosures

c: La Chance Trust
   USGS
   Hawaii DWS
WELL CONSTRUCTION PERMIT

Thy Well Be Done Well, Well No. 3686-32

Note: This permit shall be prominently displayed at the construction 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 Thy Well Be Done Well, (Well No. 3686-32) at TMK 1-5-057:061, Hawaii, subject to the Hawaii Well Construction & Pump Installation Standards (HWCPIS - February 2004) 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 (HAR).

2. This permit shall be prominently displayed, or made available, at the site of construction work until work is completed.

3. The well construction permit shall be for construction and testing of the well only. The permittee shall coordinate with the Chairperson and conduct a pumping test in accordance with the HWCPIS (the latest pump test worksheet can be obtained by contacting Commission staff or at www.hawaii.gov/dlnr/cwrm/resources_permits.htm). The permittee shall submit to the Chairperson the test results as a basis for supporting an application to install a permanent pump. No permanent pump may be installed until a pump installation permit is approved and issued by the Chairperson. No withdrawal of water shall be made for purposes other than testing without a Certificate of Pump Installation Completion. The permitted pump capacity described on the pump installation permit may be reduced in the event that the pump test does not support the capacity.

4. 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. If it can be shown that the well does not tap basal ground water then this condition may be waived after consultation with and acceptance by Commission staff. However, in no instance can the well be drilled deeper than one-half (1/2) of the theoretical thickness without Commission approval.

5. The permittee 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.

6. In the event that historically significant remains such as artifacts, burials or concentrations of shells or charcoal are encountered during construction, the permittee shall stop work and immediately contact the Department of Land and Natural Resources' State Historic Preservation Division. Work may recommence only after written concurrence by the State Historic Preservation Division.

7. 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.

8. The Well Completion Report Part I shall be submitted to the Chairperson within sixty (60) days after completion of work (please contact staff or visit www.hawaii.gov/dlnr/cwrm/resources_permits.htm for current form).

9. The permittee shall comply with all applicable laws, rules, and ordinances; non-compliance may be grounds for revocation of this permit.

10. The well construction permit application and, if relevant, any related staff submittal approved by the Commission are incorporated into this permit by reference.

11. If the HWCPIS are not followed and as a consequence water is wasted or contaminated, a lien on the property may result.

12. Any variances from the HWCPIS shall be approved by the Chairperson prior to invoking the variance.

13. The work proposed in the well construction application permit 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 the date the permit expires.

14. If the well is not to be used it must be properly capped. If the well is to be abandoned during the course of the project then the permittee must apply for a well abandonment permit in accordance with §13-168-120, HAR, prior to any well sealing or plugging work.

15. 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.

16. This permit shall apply to the location shown on the application only. If the well is to be relocated, the permittee shall apply for a new well construction/pump installation permit in accordance with §13-168-120, HAR.

17. Special conditions in the attached cover transmittal letter are incorporated herein by reference.

Date of Approval: May 5, 2010
Expiration Date: May 5, 2012

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 have signed, dated, and returned the permit to the Commission. I understand that this permit is not to be transferred to any other entity. I also understand that non-compliance with any permit condition may be grounds for revocation and fines of up to $5,000 per day starting from the permit date of approval.

Driller's Signature: __________________________ C-57 License #: BC-23379 Date: __________________________
Printed Name: Rod Diamond Firm or Title: Diamond Construction and Water Well Drilling

Please sign both copies of this permit, return one copy to the Commission office, and retain the other for your records.
April 20, 2010

TO: Morris Atta, Administrator
   Land Division

FROM: Ken C. Kawahara, P.E., Deputy Director
      Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application

Thy Well Be Done Well (Well No. 3686-32) TMK 1-5-057:061

Transmitted for your review and comment is a copy of the captioned Well Construction/Pump Installation permit application.

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 April 26, 2010. 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 Ryan Imata of the Commission staff at 587-0255.

RIss
Attachment(s)

RESPONSE:

[ ] A water lease/permit is required of this applicant and an application for such will be requested by 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: Original source of private title was issued prior to statehood.

Contact Person: Gay Martin
Phone: 587-0421

Signed: Gay Martin
Date: [Signature]
TO:  Honorable Chiyome L. Fukino, M.D., Director  
   Department of Health  
   Attention: Acting Chief, Wastewater Branch  
   Stuart Yamada, Chief, Safe Drinking Water Branch  
   Alec Wong, Chief, Clean Water Branch  
   VDr. Keith Kawakita, Office of Hazard Evaluation and Emergency Response

FROM:  Laura H. Thielen, Chairperson  
   Commission on Water Resource Management

SUBJECT:  Well Construction/Pump Installation Permit Application  
   Thy Well Be Done Well (Well No. 3686-32)

April 20, 2010

Transmitted for your review and comment is a copy of the captioned Well Construction/Pump Installation permit 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 April 26, 2010. 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 Ryan Imata of the Commission staff at 587-0255.

R: ss  
Attachment(s)

RESPONSE:

1. The well qualifies as a source which will serve as a source of public water to a public water system (defined as serving 25 or more people (at least 60 days per year to 11 or more service connections) and must contain Director of Health approval under Title 11, Chapter 20, Public Water Systems, R11-20-29.

2. The 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 to 11 or more service connections) and if the well water is used for drinking, the private owner should test for bacteriological and chemical parameters and routinely monitor the water quality thereafter. However, if future planning is done for this resource increases to meet the public water system definition then Director of Health approval is required prior to implementation.

3. 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 or an approved backflow preventer, and by clearly labeling all non-potable systems with warning signs to prevent inadvertent consumption of non-potable water. Backflow prevention devices should be visibly inspected and tested.

4. It does not appear that this well will be used for consumptive purpose and is not subject to Safe Drinking Water Regulations.

5. For the application's information, a source of possible wastewater contamination [1] is not located near the proposed well site (information not attached).

6. An NDDES permit is required.

7. Other relevant DH/DEP regulations, information, or recommendations are attached.

8. In the event that the location of the well changes but is still within the parcel described on the application, our division considers the comments to still be applicable, and we do not need to review the new location.

No comments/objectives

Contact Person:  Richard Palmer  
   Phone:  

Signed:  Richard Palmer  
   Date:  5/6/10
April 20, 2010

TO: Dr. Puualoakalani Aiu, Administrator
Historic Preservation
Morgan Davis
Historic Preservation

FROM: Ken C. Kawahara, P.E., Deputy Director
Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application
Thy Well Be Done Well (Well No. 3686-32) TMK: 1-5-057-061

Transmitted for your review and comment is a copy of the captioned Well Construction/Pump Installation permit application.

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 April 26, 2010. 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 or request additional review time, please contact Ryan Imata of the Commission staff at 587-0255. If you require additional information regarding specific information that can be provided by the applicant, please contact the applicant directly at the contact information provided on the application form.

RI:ss
Attachment(s)

RESPONSE:

[ ] This is a [ ] public (county or state) project [ ] private project and [ ] will [ ] may disturb historic sites.

We concur that the work described under this permit will not disturb historic sites.

[ ] We do not concur that the work described under this permit will not disturb historic sites. We require the following for our concurrence:

Contact Person: NANCY MCMAHON
Phone: 692-8018

Signed: 
Date: 4/22/2010
**Well Check Program**  
*4/1/04 - Revised for update to Well Standards (February 2004)*

**Data Input**

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**Results**

**Well Depth**

- Theoretical Thickness of Aquifer: 82
- 1/4 Aquifer Thickness: 20.5
- Depth of Well below Sea Level: -5 okay

**Well Casing**

- Minimum Wall Thickness
  - Material: pvc plastic
  - Minimum Thickness per standards: no requirement
  - Wall Thickness Provided: 0 no standard
  - Minimum Length of Solid Casing
    - 90% of ground to top of aquifer: 20.7
    - Length of solid casing Provided: 25 okay
  - Casing Material: Schedule 40 in compliance
    - (for pvc only - check for 200' limit) okay

**Annular Space**

- Depth of Grouting
  - Calculated Depth of Grouting: 16.1
  - Depth of Grouting provided: 21 okay
- Minimum Annular Space required: 2
- Thickness of Annular Space: 2 okay
**COMMISSION ON WATER RESOURCE MANAGEMENT**

**ROUTE SLIP FOR NEW APPLICATIONS**

**FROM:** RYAN  
**DATE:** 11-Jan-10  
**SUSPENSE DATE:** 18-Jan-10

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**WELL NUMBER** 3686-32  
**WELL NAME** Thy Well Be Done  
**WUP Number** na

**WELL CONSTRUCTION** ☑  
**PUMP INSTALLATION** ☐  
**WUPA** ☐

**ATTACHMENTS FOR APPLICATION PROCESSING** - Both applicant & staff generated

1. TRANS. LETTER
2. PERMIT PROCESS TABLE
3. CWRM MAP
4. APPL. FORM (11 COPIES)
5. USGS MAPS (11 COPIES)
6. TAX MAPS (11 COPIES)
7. PARCEL OWNER VERIF. MLS PRINTOUT
8. CONTRACTOR VERIF. DCCA LICENSE SCREEN PRINTOUT
9. ALL INFO FILLED IN
10. BACKGROUND CHECK
11. 25$ FEE DEPOSIT SLIP
12. DHP/CDUP/SMA pre-screen

(SMA map printout http://gis.hicentral.com/website/parcelzoning/viewer.htm., or INGRID'S SMA/CD MAP)  
(LUC map printout http://luc.state.hi.us/luc_maps.htm., or INGRID'S SMA/CD MAP)

**FOLDER**

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

**INCOMPLETE ACTION DATES:**

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April 20, 2010

Mr. Rod Diamond
Diamond Construction and Water Well Drilling
HCR #3 Box 14073
Keeau, HI 96749

Dear Mr. Diamond:

Well Construction/Pump Installation Permit Application for Well No. 3686-32

We acknowledge receipt, on January 26, 2010, of your completed Well Construction/Pump Installation permit application and filing fee for the Thy Well Be Done Well (Well No. 3686-32). You can expect your application to be processed within ninety (90) days from this date.

For your information, the attached table describes the process, responsible parties, and deadline requirements for drilling or modifying a well and installing, modifying, or replacing a pump.

By this acceptance letter, we are also notifying the well operator/landowner that water may not be pumped for purposes other than testing until the certificate of well construction/pump installation completion letter is issued to the well operator and landowner. Additionally, the permitted pump capacity described on the pump installation permit may be reduced in the event that the pump test does not support the capacity. No certificate of pump installation will be issued until the Commission has determined that the pump capacity will not have adverse effects on the aquifer, other nearby wells, or streams. In other words, you may need to remove the pump and install a smaller pump at the Commission's discretion before you can withdraw water for purposes other than testing.

If you have any questions about your permit application, please contact Ryan Imata of the Commission staff at 587-0255 or toll-free at 974-4000 (Hawaii), 274-3141 (Kauai), 984-2400 (Maui), or 1-800-468-4644 (Lanai & Molokai) extension 70255.

Sincerely,

KEN C. KAWAHARA, P.E.
Deputy Director

Attachment
c:  La Chance Trust
TO: Honorable Chiyome L. Fukino, M.D., Director
Department of Health
Attention: Acting Chief, Wastewater Branch
Stuart Yamada, Chief, Safe Drinking Water Branch
Alec Wong, Chief, Clean Water Branch
Dr. Keith Kawaoka, Office of Hazard Evaluation and Emergency Response

FROM: Laura H. Thielen, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application
Thy Well Be Done Well (Well No. 3686-32)

Transmitted for your review and comment is a copy of the captioned Well Construction/Pump Installation permit 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 April 26, 2010. 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 Ryan Imata of the Commission staff at 587-0255.

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 II, 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 not located near the proposed well site (information attached).

An NPDES permit is required.

Other relevant DOH rules/regulations, information, or recommendations are attached.

In the event that the location of the well changes but is still within the parcel described on this application, our division considers the comments to still be applicable, and we do not need to review the new location.

No comments/objections

Contact Person: ____________________ Phone: ____________
Signed: ____________________ Date: ____________
TO: Morris Atta, Administrator
   Land Division

FROM: Ken C. Kawahara, P.E., Deputy Director
      Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application
         Thy Well Be Done Well (Well No. 3686-32) TMIK 1-5-057:061

April 20, 2010

Transmitted for your review and comment is a copy of the captioned Well Construction/Pump
Installation permit application.

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 April 26, 2010. 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 Ryan
Imata of the Commission staff at 587-0255.

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: ________________
TO: Dr. Puaalaokalani Aiu, Administrator
   Historic Preservation

Morgan Davis
   Historic Preservation

FROM: Ken C. Kawahara, P.E., Deputy Director
   Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application
   Thy Well Be Done Well (Well No. 3686-32) TMK: 1-5-057:061

April 20, 2010

Transmitted for your review and comment is a copy of the captioned Well Construction/Pump Installation permit application.

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 April 26, 2010. 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 or request additional review time, please contact Ryan Imata of the Commission staff at 587-0255. If you require additional information regarding specific information that can be provided by the applicant, please contact the applicant directly at the contact information provided on the application form.

RESPONSE:

[ ] This is a [ ] public (county or state) project [ ] private project and [ ] will [ ] may disturb historic sites.

[ ] We concur that the work described under this permit will not disturb historic sites.

[ ] We do not concur that the work described under this permit will not disturb historic sites. We require the following for our concurrence:

Contact Person: ___________________ Phone: ___________________

Signed: ___________________________ Date: ___________________

Attachment(s)
April 20, 2010

Ms. Bobby Jean Leithead Todd
Planning Director
Planning Department
County of Hawaii
101 Aupuni Street, Suite 3
Hilo, HI 96720

Dear Ms. Todd:

Special Management Area Use Permit Requirements for
Well Construction/Pump Installation Permit Application
Thy Well Be Done Well (Well No. 3686-32)

Transmitted for your review and comment is a copy of the captioned Well Construction/Pump Installation permit application.

We would appreciate your comments on the captioned application with regard to the SMA permitting requirements specific to your division. Please respond by returning this cover memo form by April 26, 2010. 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 Ryan Imata of the Commission staff at 587-0255.

Sincerely,

[Signature]

LAURA H. THIELEN
Chairperson

RESPONSE:

[ ] This well project [ ] requires [ ] does not require a SMA. If a SMA is required it [ ] has [ ] has not been approved and [ ] is [ ] is not currently active.

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

[ ] No objections

[ ] Other comments:

Contact Person: ___________________________ Phone: ________________

Signed: ________________________________ Date: ________________
Assessed values and Building Details reflect tax year 2010 for Oahu, and 2009 for all other islands. Taxes reflect tax year 2009.

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

Copyright ©4/9/2010 by Hawaii Information Service
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<td><strong>CONDITIONS AND LIMITATIONS:</strong></td>
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<td><strong>BUSINESS ADDR:</strong> HCR #3 BOX 14073 KEAAU HI 96749</td>
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<td><strong>MAILING ADDR:</strong></td>
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Click here to enter search criteria for prior complaints history ->

For prior complaints and disciplinary history, contact licensing and business information center at (808) 587-3295.
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REMARKS:
LINE (1) Lincoln's Well
LINE (2) Thy Well Be Done
LINE (3)                              
LINE (4)                              
LINE (5)                              
LINE (6)                              
LINE (7)                              
LINE (8)                              
LINE (9)                              
LINE (10)                             

STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
APPLICATION FOR A WELL CONSTRUCTION
PUMP INSTALLATION PERMIT

ORIGINAL
MAILED

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 form must be accompanied by 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 808-587-0225. For further information and updates to this application form visit http://www.hawaii.gov/dlnr/cwrm.

WELL LOCATION INFORMATION

1. STATE WELL NO. (if already assigned)
2. WELL NAME
3. ISLAND
4. TOWN
5. TOWNSHIP
6. RANGE
7. SECTION
8. FEDERAL RECORD NO.

The following must be attached to this application is accepted as complete (check off if attached):
☐ Portion of 7.5-Minute Series USGS topographic map (scale: 1:24,000) with well location labeled and include the name of the quad map.
☐ Property tax map, showing well location referenced to established property boundaries.
☐ Photograph of the proposed well site.
☐ A schematic diagram showing the well site, access road and proposed well infrastructure (if applicable).

5. WELL OPERATOR’S NAME/COMPANY
6. LANDOWNER’S NAME/COMPANY

Well Operator’s Mailing Address
Landowner’s Mailing Address

7. Well Operator’s Phone
8. Well Operator’s Fax
9. Well Operator’s E-mail
10. Landowner’s Phone
11. Landowner’s Fax
12. Landowner’s E-mail

PROPOSED WELL CONSTRUCTION

7. Proposed Well
☐ New Well
☐ Existing Well
☐ Modify Existing Well
☐ Abandon/Seal Well

8. Construction Type
☐ Borehole
☐ Open Drill
☐ Trench
☐ Flowmeter

9. Proposed Amount of Withdrawal, gpd
☐ Weir
☐ Open Pipe
☐ Check Valve
☐ Other

10. Proposed Pumping Rate, gpm (gallons per minute)

11. Proposed Pumping Rate, gpm (gallons per minute)

12. Method of Flow measurement
☐ Open Pipe
☐ Check Valve
☐ Other

13. Conservation District Use Permit (COUP)
☐ Required, COUP # date approved
☐ Not Required

14. Special Area Permit (SMA)
☐ Required, SMA # date approved
☐ Not Required

15. Municipal (water systems serving greater than 25 individuals or 15 service connections)
☐ Yes
☐ No

16. Irrigation (describe crop and no. of acres)

17. Industrial (describe)

18. Military (describe)

20. Other (describe)

OTHER LEGAL REQUIREMENTS

21. Conservation District Use Permit (CDUP)
☐ Required, CDUP # date approved
☐ Not Required

22. Special Management Area Permit (SMAP)
☐ Required, SMA # date approved
☐ Not Required

23. Historic Preservation District (HPD) of the DLNR
☐ I have consulted with the HPD regarding potential impacts of well construction activities on historic sites. I have attached applicable documentation from the HPD.
☐ I have not consulted with the HPD regarding potential impacts of well construction activities on historic sites. I understand that checking with the HPD prior to making this application will expedite my review.

24. WELL DRILLER (Must be filled out if application is for Well Construction)

Rodney K Diamond

25. PUMP INSTALLER (Must be filled out if application is for Pump Installation)

Rodney K Diamond

NOTE: Signing below indicates that the signatories understand and swear that the information provided is accurate and true to the best of their knowledge. Further, the signatories understand that upon permit approval: 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 proposed work; 3) in the event that the application is not completed correctly, any permit may be suspended until the item is brought in compliance, and any work done while the permit is in suspension may result in fines of up to $5000/day.

For Official Use Only:
RECEIVED COMMISSION ON WATER RESOURCE MANAGEMENT JAN - 8 AM 8:10 2010

Rodney K Diamond

HCR #3 Box 14073 Keaau HI 96749
Phone: 987-8100 Fax: 966-4129
Email: Rodney K Diamond

Rodney K Diamond

HCR #3 Box 14073 Keaau HI 96749
Phone: 987-8100 Fax: 966-4129
Email: Rodney K Diamond

Signature
Print
Date

Signature
Print
Date

Signature
Print
Date
Proposed location for Thy Well Be Done
PROPOSED WELL SECTION (Please attach schematic if different from diagram provided below)

Hole Diameter: 8.5 inches

Elevation at top of casing 26 ft, msl

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

Ground Elevation: 25 ft, msl

Cement Grout: 21 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 (1.5" for positive displacement, 3" for other methods):

- 2 in.

Rock or Gravel Packing:
- 9 ft
- Material:
  - x Crushed Basalt
  - □ Round Gravel

Estimated Water Level:
- 2 ft, msl

Solid Casing:
- (≥ 90% x (Ground Elevation - 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

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 Basalt Wells - bottom elevation of well shall not be deeper than 1/4 of aquifer thickness or, Bottom Elevation of Well Limit = (Water Elevation + )

Example: Estimated + 2 ft. Water Level Elev. Bottom Elevation of Well Limit = (2) = -18.5 ft.

Solid Casing Material:
- Carbon Steel: compliant with (check one or more): □ ANSI/WWWA C220 □ API Spec. 5L □ ASTM A53 □ ASTM A139
- And compliant with (check one or more): □ ASTM A422 (or A506) □ 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
- □ Centrally Cast Resin Pipe conforming to ASTM D2997
- □ Reinforced Plastic Mortor Pressure Pipe conforming to ASTM D3517
- □ Glass Fiber Reinforced Resin Pressure Pipe conforming to AWWA C950
- □ PTFE Fluorocarbon Tubing conforming to ASTM D32396
- □ FEP Fluorocarbon Tubing conforming to ASTM D3266

Open Casing Material:
- Carbon Steel: compliant with (check one or more): □ ANSI/WWWA C220 □ API Spec. 5L □ ASTM A53 □ ASTM A139
- And compliant with (check one or more): □ ASTM A422 (or A506) □ 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
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- □ Reinforced Plastic Mortor Pressure Pipe conforming to ASTM D3517
- □ Glass Fiber Reinforced Resin Pressure Pipe conforming to AWWA C950
- □ PTFE Fluorocarbon Tubing conforming to ASTM D32396
- □ FEP Fluorocarbon Tubing conforming to ASTM D3266

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

Ground Elevation to top of hole (min. 70% of distance from well to aquifer thickness or, whichever is less.)

Note: Neither bentonite nor mud should be used in saturated zones during drilling.

Perforated or Screen Hole: ≤ 1/2 in.

Diameter: ___ in

Length: ___ ft

Total Depth: 30 feet

Solid Casing:
- Open Hole:
- Rock or Gravel Packing:
- Material:
  - x Crushed Basalt
  - □ Round Gravel

Bottom Elevation: ___ ft, msl

Other Displacement:
- Grouting licensed by the

ASTM A1785