## COMMISSION ON WATER RESOURCE MANAGEMENT

(05/02)

<table>
<thead>
<tr>
<th>FROM:</th>
<th>DATE:</th>
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</tr>
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<tbody>
<tr>
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</table>

### TO: INIT. TO: INIT.

| BAUER, G. | MATHIAS, T. |   |
| CHING, F. | NAKAMA, L.  |   |
| DANBARA, S.| NAKANO, D.  |   |
| FUJII, N. | NISHIOKA, L.|   |
| GOODING, K.| OHYE, M.    |   |
| HARDY, R. | SAKODA, E.  |   |
| HIGA, D.  | SUBIA, S.   |   |
| ICE, C.   | SWANSON, S.|   |
| IMATA, R. | UYENO, D.   |   |
| JINNAI, R.| YODA, K.    |   |
| KUNIMURA, I.|          |   |

### FOR: PLEASE:

| Approval | See Me |
| Signature | Review & Comment |
| Information | Take Action |
| Type Draft | Type Final |
| File | Xerox copies |

### COMMENTS

A. Install 15 H.P. motor.
<table>
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<td>CHYE, M.</td>
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<td>Per</td>
<td>UWANE, J.</td>
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<td>JINNAI, R.</td>
<td>Per</td>
<td>YODA, K.</td>
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Put special condition permit request on line signature.

Any problem issuing an old WCIPS? (But mine attached report).

Ryan - is pump replacement after the fact? Also, can we fill in info he already provided, or highlight the ones he's missing on the new form.

Per phone call, tom none representing app.
Mr. Paul Bergstedt  
P.O. Box 1746  
Kailua Kona, HI 96745  

Dear Mr. Bergstedt:

Well Construction / Pump Installation Permit Application for Well Nos. 6450-01 and 6450-05

We have received your well construction / pump installation permit applications for the Virgil Place Wells (Well No. 6450-01 and 6450-05). However, per phone conversation with Mr. Tom Nance on Wednesday April 22, 1998, we understand that he has assumed responsibility for preparation of permit applications. Thus, we are returning your application you sent us.

If you have any questions, please contact Mr. Ryan Imata of the Commission staff at 587-0255 or toll-free at 974-4000 (Hawaii), extension 70255.

Sincerely,

[Signature]

EDWIN T. SAKODA  
Acting Deputy Director

RI:ss  
Enclosure
If there will be a problem with issuing these permits, please notify me immediately. Dr. Place is in a bind to get this project up and running. Any help you can give us to speed up the permit process will be appreciated. Dr. Place is in Europe till April, so he has authorized me to apply for these permits.

Thank you,
Sincerely,

Paul Beyskede
P.O.B. 1746
Kailua Kona
1-808-882-7080

When Dr. Place returns from Europe, he will send his signature and explanation to affix to these applications for
Dear Sirs:

Enclosed are 2 applications for permits:

One, to change pumps from 15HP to 40HP, in the well completed in 1996.

The well that was completed in 1996 has a 15HP pump that produces 75GPM pumping into 100,000 storage at 500' elevation. This is State Well # G450-01 Virgil Place TMK 5-9-5:05

The second well, located 1000' to the North, on the same lot, was drilled in 1983 to a depth of 400'.

We wish to enlarge hole to 14" diameter to allow installation of 8" steel casing and install the 15HP pump removed from the first well.

There are no neighboring wells that would be affected by these projects.

The water is tidal influenced and had a salinity of about 1000 p.p.m.

This is non-potable water for irrigation.

I have enclosed a brochure to explain the need for this water.

During construction of this Project, (Botanical Garden), the demand for water will far exceed the 215GPM that EDAW Inc. projected for the maintenance of Pua Mau, after it is fully developed.

If at all possible, we would appreciate your due consideration in the matter, because the drought conditions have exacerbated the growing need for water.

Paul Bergstedt (for Virgil Place)
APPLICATION FOR (check one)

☐ WELL DRILLING PERMIT
☐ WELL MODIFICATION PERMIT

Instructions: Send completed application and attachments to Department of Land and Natural Resources, P.O. Box 373, Honolulu, Hawaii 96809.

Reference: Regulation 9, Dept. of Land & Natural Resources.

Is the well located in a Designated Ground Water Control Area? ☐ Yes ☒ No

If "yes", application must be accompanied by a Water Use and/or Water Supply Permit and a non-refundable filing fee of $100 payable to the Department of Land & Natural Resources. However, if application is for minor modification of well, filing fee may be waived. If "no", no filing fee is required. Filing fee is waived for federal, state, and county government agencies.

1. WELL LOCATION: Island ☐ HAWAI'I Tax Map Key 5-9-5-5. Attach a plot plan showing well location referenced to established property boundaries.

2. WATER USER ☐ DA VINCI PLACE Telephone 882-7744

Address: ☐ "" Code: ☐ ""

3. PROPOSED DRILLING COMPANY: ☐ DAVID McAllister 657/721/7

4. PROPOSED WORK: ☐ Drill new well ☐ Deepen ☐ Redrill ☐ Alter ☐ Seal
☐ Abandon ☐ Install new pump ☐ Replace pump ☐ Modify pump

Fill in the diagram and briefly describe the proposed work (use back of form if necessary):

"Remove casing, Ream bore hole from 12" to 14", Install 8" steel casing and 55' screen - About 3' and longer as required. Install 15 HP Pump"

5. PROPOSED USE: ☐ Municipal ☐ Military ☐ Agriculture ☐ Industrial
☐ Domestic ☐ Disposal ☐ Other (specify) ☐

6. PROPOSED AMOUNT OF WITHDRAWAL: Check most appropriate box and fill in amount.
☐ Daily
☐ Monthly
☐ Yearly

7. PROPOSED PUMP OR FLOW CAPACITY: 15 Hp 75 gallons per minute

Signature: ☐ "" Date: ☐ "" Water User

Signature: ☐ "" Date: ☐ "" Landowner of Well Site

For Official Use:

State Well No. ☐ ""

DLNR Permit No. ☐ ""

DLNR Application No. ☐ ""
APPLICATION FOR (check one)

☐WELL DRILLING PERMIT
☒WELL MODIFICATION PERMIT

Instructions: Send completed application and attachments to Department of Land and Natural Resources, P.O. Box 373, Honolulu, Hawaii 96809.

Reference: Regulation 9, Dept. of Land & Natural Resources.

Is the well located in a Designated Ground Water Control Area?  Yes ☒ No
If "yes", application must be accompanied by a Water Use and/or Water Supply Permit and a non-refundable filing fee of $100 payable to the Department of Land & Natural Resources. However, if application is for minor modification of well, filing fee may be waived. If "no", no filing fee is required. Filing fee is waived for federal, state, and county government agencies.

1. WELL LOCATION: Island ✗HAWAIIT Tax Map Key 5-9-5-5. Attach a plot plan showing well location referenced to established property boundaries.

2. WATER USER ☐Virgil Place Telephone 882-7749
   Address POB 4555 Kawaihae Kailua Zip Code 96745

3. PROPOSED DRILLING COMPANY: David McGillicuddy & C576212

4. PROPOSED WORK: ☐Drill new well ☐Deepen ☐Redrill ☐Alter ☐Seal
   ☐Install new pump ☐Replace pump ☐Modify pump

   Fill in the diagram and briefly describe the proposed work (use back of form if necessary):

   Remove old pump 15 ft. Install new pump 40 ft.
   HS built attached

PROPOSED SECTION OF WELL

Elevation at top of casing ____________________________ ft., msl.

Ground Elev. ____________________________ ft., msl

Cement Grout ____________________________ ft.

Hole Dis. ____________________________ in.

Total Depth ____________________________ ft.

Rock Packing ____________________________ ft.

Solid casing: Material ____________________________ Length ____________________________ ft.

Diameter ____________________________ in.

Wall thickness ____________________________ in.

Casing: ☐Perforated ☐Screen

Material ____________________________ Length ____________________________ ft.

Diameter ____________________________ in.

Wall thickness ____________________________ in.

Openings ____________________________ eq.in./L.F

Open Hole: Length ____________________________ ft.

Diameter ____________________________ in.

*Rough approximate elev. at filing. Final elev. (msl) by a surveyor licensed by the State must be submitted at start of construction.

5. PROPOSED USE: ☐Municipal ☐Military ☐Agriculture ☐Industrial
   ☐Domestic ☐Disposal ☐Other (specify) ____________________________

6. PROPOSED AMOUNT OF WITHDRAWAL: Check most appropriate box and fill in amount.

☐Daily 4400 gallons ☐Monthly 2400 gallons ☐Yearly 2800 gallons

7. PROPOSED PUMP OR FLOW CAPACITY: 40 h.p. 200 gallons per minute

Signature: Virgil Place Water User 

For Official Use:

State Well No. 6450-01

DLNR Permit No. ____________________________

DLNR Application No. ____________________________

Signature: Landowner of Well Site 

Date: ____________________________
PROPOSED PUMP INSTALLATION

8" RE 15 Station 64-64-64
TMA 5-9-5.5
Well Place

Steel casing 316 x 8"

Bore Hole 14"

Gravel Pipe 3" SCH 40

8" Casing 368' - 0"

Centralizers 3" x 6" Bushing (PVC) 6 each

Bottom Air Line 378
Intake 380
300 5/16" Holes

Submersible Pump
Cordless 40 HP 225 stc 960v ac 3 phase
Flow induced to cool motor (PVC)

Bottom Bore Hole 383

6/60-05

Aft

Ground El. 370.09

Grout Surface 13' 43"

Gravel Pack 343' 383'

SS Screen 15' 250
368' - 383'

Water level 372.09
From RP top well casing

Pump wire 7/8 #4

Drawn by Bergseth
Feb 1746
MONDAY 9:6:246
April 23, 1998

Mr. Paul Bergstedt
P.O. Box 1746
Kailua Kona, HI

Well Construction / Pump Installation Permit Application for Well Nos. 6450-01 and 6450-05

Dear Mr. Bergstedt:

We have received your well construction / pump installation permit applications for the Virgil Place Wells (Well No. 6450-01 and 6450-05). However, per phone conversation with Mr. Tom Nance on Wednesday April 22, 1998, we understand that he has assumed responsibility for preparation of permit applications.

If you have any questions, please contact Mr. Ryan Imata of the Commission staff at 587-0255.

Sincerely,

Edwin T. Sakoda
Acting Deputy Director

RI:ss
encl.
March 3, 2003

Mr. Virgil Place
P.O. Box 44555
Kawaiehae, HI 96743

Dear Mr. Place:

Cancellation of Well Construction Permit for Well No. 6450-01

We have not yet received a Well Completion Report for the Kohala Estates Well (Well No. 6450-01). Because your permit expired on June 19, 2000 and we have not yet received any information or completion reports included in your permit package regarding the construction of your well, we are notifying you that your permit is cancelled as of June 19, 2000. If for some reason the work was completed, please explain what work has been done, and complete the applicable forms.

If you have any questions, please contact Ryan Imata of the Commission staff at 587-0255 or toll-free at 974-4000 (Hawaii), extension 70255.

Sincerely,

[Signature]
DEAN A. NAKANO
Acting Deputy Director

RI:ss
<table>
<thead>
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<td>FOR: 4 Approval</td>
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<tr>
<td>TO: CHING, F.</td>
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<td>4 Signature</td>
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<tr>
<td>TO: FUJII, N.</td>
<td>INIT: NAKANO, D.</td>
<td>5 Information</td>
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<tr>
<td>TO: HARDY, R.</td>
<td>INIT: OHYE, M.</td>
<td>6 Approval</td>
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<tr>
<td>TO: HIGA, D.</td>
<td>INIT: SAOKA, E.</td>
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<tr>
<td>TO: HIRANO, E.</td>
<td>INIT: SUBIA, S.</td>
<td>Information</td>
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<td>TO: ICE, C.</td>
<td>INIT: SWANSON, S.</td>
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<tr>
<td>TO: IMATA, R.</td>
<td>INIT: UWAIN, J.</td>
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<tr>
<td>TO: JINNAI, R.</td>
<td>INIT: UYENO, D.</td>
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<tr>
<td>TO: JOHNS, T.</td>
<td>INIT: YODA, K.</td>
<td></td>
</tr>
<tr>
<td>TO: KUNIMURA, I.</td>
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</tbody>
</table>

WELL CONSTRUCTION

☐ PUMP INSTALLATION PERMIT FOR: Kohala Estates Well (G450-01)

ATTACHMENTS FOR WELL CONSTRUCTION PERMIT:
1 COVER LETTER
2 PERMIT (2x)
3 PUMP TEST
4 DOH COMMENTS
5 WCR FORM

TO BE SENT TO APPLICANT
FOR OFFICE USE ONLY

ATTACHMENTS FOR PUMP INSTALLATION PERMIT:
1 COVER LETTER
2 PERMIT (2x)
3 DOH COMMENTS
4 WCR FORM
5 WUR FORM

TO BE SENT TO APPLICANT
FOR OFFICE USE ONLY

long story -
my update of
the well check program
incorrectly calculated
values. Everything's
all fixed now.
Hence only 1
Special condition.
Mr. Virgil Place  
P.O. Box 44555  
Kawaihae, Hawaii  96743  

Dear Mr. Place:

Well Construction Permit  
Kohala Estates Well (Well No. 6450-01)  

Enclosed are two (2) copies of your approved Well Construction Permit for the captioned well(s) which authorizes 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 12:  

**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. The wall thickness shall be in accordance with Section 2.4c of the Hawaii Well Construction and Pump Installation Standards (HWCPIS).  

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, 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."
**SECTION 1: WELL LOCATION INFORMATION**

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<tr>
<th>Island</th>
<th>HAWAII</th>
<th>Proposed Use</th>
<th>Irrigation</th>
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<td>Aquifer System</td>
<td>KOHALA</td>
<td>Proposed Withdrawal</td>
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<td>Aquifer Sector</td>
<td>MAHUUKONA</td>
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**SECTION 2: WELL SECTION DATA**  (enter data in grey cells only)

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<tr>
<th>Elevation at top of casing</th>
<th>Solid Casing Material</th>
<th>Ground Elevation</th>
<th>Cement Grout</th>
<th>Rock Packing</th>
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<tbody>
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<td>ft., m.s.l.</td>
<td>ft.</td>
<td>ft.</td>
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<th>Hole Diameter</th>
<th>Total Depth</th>
<th>Estimated Head</th>
<th>Calculated Aquifer Thickness</th>
<th>County Water Supply (Y/N ?)</th>
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<tr>
<td>in.</td>
<td>ft.</td>
<td>ft.</td>
<td>287 ft.</td>
<td>287 ft.</td>
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**SECTION 3: CHECKLIST**  (values to check are shaded)

| Well Depth | Theoretical Thickness of Aquifer | 287 ft. |
| Depth of Well below Sea Level | 15 ft. | okay (refer to HWCPIS Section 2.2) |

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<th>Minimum Wall Thickness</th>
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<td>County or Non-County</td>
<td>non-county</td>
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<tr>
<td>Minimum Thickness per standards</td>
<td>0.250 in.</td>
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<tr>
<td>Wall Thickness Provided</td>
<td>0.186 in. too small (refer to HWCPIS Section 2.4 c)</td>
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<p>| Minimum Length of Solid Casing | 349.2 ft. |
| Length of solid casing Provided | 385 ft. okay (refer to HWCPIS Section 2.4 d) |
| Casing Material | ASTM A-242 #N/A (refer to HWCPIS Section 2.4 e) |
| Annular Space | If the cell above reads #N/A, reference HWCPIS |
| Depth of Grouting | Calculated Depth of Grouting |
| Depth of Grouting provided | 360. ft. okay (refer to HWCPIS Section 2.6 c) |
| Thickness of Annular Space | 3 in. okay (refer to HWCPIS Section 2.6 d) |</p>
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<th>Year Drilled</th>
<th>Latitude</th>
<th>Longitude</th>
<th>Type</th>
<th>Case Dia in.</th>
<th>Total Depth ft.</th>
<th>Ground</th>
<th>Bottom Solid Casing</th>
<th>Bottom Perf Casing</th>
<th>Bottom of Hole</th>
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<th>Cl-Temp</th>
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TO: Honorable Lawrence Miike, Director
Department of Health
Attention: Dennis Tulang, Wastewater Branch
William Wong, Safe Drinking Water Branch

FROM: Michael D. Wilson, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
Kohala Estates Well (Well No. 6450-01)

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 May 28, 1998.

Please find a map, attached, to locate the proposed well. If you have any questions about this permit application, request additional information, or request additional review time, please contact Mr. 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 (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 [] not located near the proposed well site (information attached).

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

No comments/objections

Contact Person: Lori N. Kajiwara
Phone: 586-4294

Signed: Michael D. Wilson
Phone: 520-98
Date: 5-20-98
Property Owner: Andrea Place
Address: Kohala Estates
Lot No: 10
Tax Map Key: 5-9-5-4
Island: Hawaii
City: City
District: District
Builder or Contractor: self
Intended For: dwelling
Primary: X
Secondary: Other
Distance From Building: 26'
Boundary: 100'
Diameter (Clear) Ft: 7'
Depth Ft: 10' (cap. 2878 Gal.)
No. Ft. Down to Water Table: Ground Slope
Soil Profile (Starting from Surface): 1/3 of hole rock, 2/3 small rock & gravelly type material
Type of Wall or Curb: Reinforced Concrete Cover
Distance from Finished Ground to Top of Cover (Ft.):
Date Certificate Issued:
Date Approved: 5/19/81
Sanitarian: [Signature]
STATE OF HAWAII - DEPARTMENT OF HEALTH
ENVIRONMENTAL HEALTH DIVISION - SANITATION BRANCH

PROPERTY OWNER: Virgil Place
ADDRESS: Lot 10 Kohala Estates

New Construction: Yes
Intended for: Dwelling

Builder or Contractor: ____________________________

Distance from building: 32'
Boundary: ____________________________
Stream or well: ____________________________

Diameter (clear): 5\(\frac{1}{2}\) x 6\(\frac{1}{2}\)
Depth: 11
No. ft. down to water if any: ____________________________

Capacity (Gallons): 2941
Ground slope: ____________________________

State soil or rock formation starting from surface: 5' soil & small rock, 6' rock & gravelly material

Kind of wall or curb: ____________________________
Kind of cover: Core.

Distance from surface of ground to top of cover: ____________________________

Approved: 7/28/83

SANITARIAN: ____________________________
NOTE:
ENGINEER MUST APPROVE ANY CHANGES PRIOR TO CONSTRUCTION

NOTE:
1. SEE SITE PLAN DETAIL SHEET 4a
2. SEE SHEET 4b FOR NOTES, DESIGN DATA AND SETBACKS

JACOBY ENGINEERING
P.O. BOX 16323
HILO, HAWAI'I 96721
NOTE:
ENGINEER MUST APPROVE ANY CHANGES PRIOR TO CONSTRUCTION!

PROPOSED RESIDENCE
2 BEDROOM
(DESIGNED FOR 5 BEDROOMS)

BENDS AS NEEDED
VERT & HORIZ
W/C.O.T.G.

1' W. ROCK WALL

TOE OF 3' HIGH SLOPE

COVERED WALK

EXISTING MASTER MODULE
2 BEDROOM

4" P.V.C. SCHEDULE 40,
WATERTIGHT LINE, 1' MIN.
COVER, 2% MIN. SLOPE,
PROPER BEDDING

BENDS AS NEEDED
VERT. & HORIZ.

SEPTIC TANK - 1250 GAL.
(SEE DETAIL)

PERFORATED PIPE
(SEE DETAIL)

PERCOLATION TEST LOCATION

DISTRIBUTION BOX W/C.O.T.G.
(SEE DETAIL)

12' x 30' ABSORPTION BED
(SEE DETAIL)

RECORD DRAWING
4-1-97
DATE

JACOBY ENGINEERING
P.O. BOX 10323
HILO, HAWAII 96721

SITE PLAN DETAIL
(SEE OVERALL SITE PLAN SHEET 4)
STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
P. O. BOX 621
HONOLULU, HAWAII 96809

MAY 11 1998

TO: Honorable Lawrence Milike, Director
    Department of Health
    Attention: Dennis Tulang, Wastewater Branch

FROM: Michael D. Wilson, Chairperson
      Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
          Kohala Estates Well (Well No. 6450-01)

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 May 28, 1998.

Please find a map, attached, to locate the proposed well. If you have any questions about this
permit application, request additional information, or request additional review time, please contact Mr.
Ryan Imata of the Commission staff at 587-0255.

RI:ss
Attachment(s)

RESPONSE:

[ ] This well qualifies as a source which will serve as a source of potable water to a public water system (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.

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    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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[ ] For the applicant's information, a source of possible wastewater contamination [ ] is located near the proposed well site
    (information attached).

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

[ ] No comments/objections

Contact Person: William Wong
Phone: 586-4258
Date: 05/18/98
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, Chapter 11-55, 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
Mr. Virgil Place
P.O. Box 44555
Kawaihae, HI 96743

Dear Mr. Place:

Well Construction / Pump Installation Permit Application for Well No. 6450-01

We acknowledge receipt, on May 5, 1998, of your completed well construction / pump installation permit application for the Kohala Estates Well (Well No. 6450-01). You can expect your application to be processed within ninety (90) days from this date.

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 Mr. Ryan Imata of the Commission staff at 587-0255 or toll-free at 974-4000 (Hawaii), extension 70255.

Sincerely,

[Signature]
EDWIN T. SAKODA
Acting Deputy Director

RI:ss

C: Tom Nance Water Resource Engineering
TO: Honorable Lawrence Miike, Director
Department of Health
Attention: Dennis Tulang, Wastewater Branch
William Wong, Safe Drinking Water Branch

FROM: Michael D. Wilson, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
Kohala Estates Well (Well No. 6450-01)

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

[ ] No comments/objections

Contact Person: __________________________ Phone: __________________________
Signed: __________________________ Date: __________________________
DEPARTMENT OF LAND AND NATURAL RESOURCES

DATE: 5/8/98

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TOTAL 50.00

REMARKS: LINE (1) Well No. 6450-01 & 6450-05 (WTPA/PIP)
LINE (2)
LINE (3)
LINE (4)

---

TNWRE INC.
DBA TOM NANCE WATER RESOURCE ENGINEERING
680 ALA MOANA BLVD., STE. 406
HONOLULU, HI 96813

May 4, 1998

* * Fifty and 00/100 * *
DOLLARS $50.00

TO THE ORDER OF
Department of Land and Natural Resources

DETACH AND RETAIN THIS STATEMENT
THE ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW.
IF NOT CORRECT PLEASE NOTIFY US PROMPTLY. NO RECEIPT DESIRED.

DELUXE FORM WVC-3 V-2

Filing Fee: Pump Installation and Well Modification Permit Applications for Well Nos. 6450-01 and -05 in Kohala Estates [Job No. 98-32]

$50.00
APPLICATION FOR PERMIT

Well Construction □ Pump Installation □

Instructions: Please print in ink or type, attach required maps, and send the completed application & two (2) copies to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. This application must be accompanied by a non-refundable filing fee of $25.00 payable to the Department of Land and Natural Resources. The Commission may not accept incomplete applications. For assistance in completing this application, please call the Commission’s Regulation Branch at 587-0225.

1. APPLICANT: (circle primary contact[a], b, or c) Primary Fax: 808-882-7749
   (a) WELL OWNER
      Firm/Name  Virgil Place
      Contact Person  Virgil Place
      Address  P.O. Box 44555
                 Kawaihæ, Hawaii 96743
   (b) LANDOWNER
      Firm/Name  Virgil Place
      Contact Person  Virgil Place
      Address  P.O. Box 44555
                 Kawaihæ, Hawaii 96743
   (c) CONTRACTOR
      Firm/Name  David McAllister
      Contact Person  c/o Paul Bergsted
      Address  P.O. Box 1746, Kona, Hawaii 96745

2. WELL LOCATION/NAMESPACE: Existing Well 6450-01 Island Hawaii
   Address  Ala Kahua, Kohala Estates, Hawaii
   Tax Map Key  5-9-5-04

3. (a) PROPOSED WORK:  □ Drill New Well  □ Deepen
   □ Modify Existing Well  □ Redrill
   □ Abandon/Seal  *
   □ Replace Pump  *
   * Be sure to complete and submit well abandonment report upon completion of work.

   (b) WELL TYPE:  □ Dug  □ Bored  □ Driven  □ Drilled  □ Radial
   □ Is this well a part of a battery of wells?  □ Yes  □ No
   (briefly describe and fill in the diagram on the back of the form.)

4. PROPOSED PUMP INFORMATION:  Rated Pump Capacity 100 gallons per minute
   Motor: Electric, rate horsepower: 15
   □ Deep Well Turbine  □ Rotary  □ Propeller  □ Centrifugal
   □ Submersible  □ Rotary-Displacement  □ Reciprocating  □ Rotary-Gear
   If Pump Replacement, Existing Pump Capacity: 100 gallons per minute

5. PROPOSED USE:
   □ Municipal (including hotels, stores, etc.)  □ Industrial
   □ Domestic (individual, noncommercial water sys.)  □ Dwelling Units
   □ Irrigation (crop)  □ Arboretum and Botanical Gardens
   □ Military
   □ Other:

6. (a) PROPOSED AMOUNT OF WITHDRAWAL: 54,000 gallons per day
   (b) METHOD OF FLOW MEASUREMENT:  □ Flow-meter  □ Open-pipe  □ Orifice Plate  □ Weir

7. PENDING ACTIONS:  □ CDUA  □ SMA  □ EIS  □ EA  □ NONE  □ Other(explain)
   Completion Date: __________

8. REMARKS, EXPLANATIONS: The existing 4-inch PVC casing will be removed, the borehole will be reamed to 14 inches, and new 8-inch steel casing will be installed. Following this, the 15 horsepower pump and motor now in Well 6450-05 will be installed in this well.
   (If more space is needed, continue on back)

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 30 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: Virgil Place
(See Attached Authorization) Signature: __________ Date: ________

Landowner: Virgil Place
(See Attached Authorization) Signature: __________ Date: ________

Contractor: David McAllister
Signature: __________ Date: __________
To whom it may concern

Below is my signature to be attached to my application for well modification and pump installation permits

Virgil A. Place

P.O. Box 44555 • 10 Ala Kahua • Kawaihae, Hawaii 96743 U.S.A.
Telephone / Fax 1-808-882-7749
Mr. Michael D. Wilson - Chairperson  
Commission on Water Resource Management  
Department of Land and Natural Resources  
State of Hawaii  
P. O. Box 621  
Honolulu, Hawaii 96809

Dear Mr. Wilson:

Pump Installation and Well Modification Permit Applications for  
Well Nos. 6450-01 and -05 in Kohala Estates, North Kohala, Hawaii

On behalf of Dr. Virgil Place, I am pleased to submit the enclosed permit applications and filing fees for two existing wells in Kohala Estates on the Big Island. For Well 6450-05, the existing 15 horsepower, 100 GPM pump will be replaced with a 40 horsepower, 200 GPM pump. For Well 6450-01, its 4-inch PVC casing will be removed, the 8-inch borehole will be reamed to 14 inches, and an 8-inch steel casing will be installed. Following this, the 15 horsepower pump removed from Well 6450-05 will be re-installed in Well 6450-01.

If you have any questions or require additional information, please feel free to call.

Sincerely,

Tom Nance

cc: Mr. Paul Bergsted  
Dr. Virgil Place

Enclosures
Gentlemen:

Location Map of # 9 PLACE KOHALA ESTATES

Enclosed herewith is a map of the project area. Please accurately mark the location of the well and return the map to our office with the completed forms. Thank you very much for your cooperation.

Very truly yours,

ROBERT T. CHUCK
Manager-Chief Engineer

DEAR SIR:

AS PER YOUR REQUEST.

THANK YOU

ENC.
<table>
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<th>Action</th>
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<tr>
<td>Robert T. Chuck</td>
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<td>Takeo Fujii</td>
<td>Take action by</td>
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<tr>
<td>James Yoshimoto</td>
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<tr>
<td>Manabu Tagomori</td>
<td>Review &amp; comment</td>
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<td>Hong Fong Chang</td>
<td>For information</td>
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<td>Herbert Morimatsu</td>
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<td>Harold Sakai</td>
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<td>Leslie Asari</td>
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<td>Paul Matsuo</td>
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<td>Noboru Kaneshiro</td>
<td>Elsie Yonamine</td>
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<td>Alyce Konishi</td>
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</table>

Send Location map (quad) to owner.  

6450-0
State of Hawaii
DEPARTMENT OF LAND AND NATURAL RESOURCES
Division of Water and Land Development
P. O. Box 373
Honolulu, Hawaii 96809
August 2, 1979

Driller: Big Island Drlg. Co.

Owner: Virgil A. Place

Re: Well _____ Kawaihae ______________ Hawaii Island

We acknowledge receipt of your Notice of Intent to Drill dated 7/16/79___________.

☐ A record of the well is required by the Department of Land & Natural Resources. Please complete the attached Drillers' Report form and submit it to our office not later than 90 days after the well has been constructed or tested.

☐ A record of the well is required by the Department of Land & Natural Resources. Please complete the attached Drillers' Report form for only those items checked at the left margin and submit this form to our office not later than 90 days after the well has been constructed or tested.

☐ A record of the well is not required by the Department of Land & Natural Resources. Thank you very much for informing us of your project.

Reference: Chapter 178, HRS, Wells, Generally.

Very truly yours,

ROBERT T. CHUCK
Manager-Chief Engineer
August 2, 1979

Gentlemen:

Location Map of Place/ South Kohala Estates

Enclosed herewith is the Drillers' Report form and a map of the project area. Please accurately mark the location of the well and return the map to our office with the completed forms. Thank you very much for your cooperation.

Very truly yours,

[Signature]

ROBERT T. CHUCK
Manager-Chief Engineer

Enc.
# DRILLER'S REPORT

## DESCRIPTION

**Date of report** 5 - 5 - 80  
**Person filing report** MAXIMILIANO A. FERNANDEZ

### WELL

**A. OWNER** Virgil A. Place  
**NAME** #9 Place / Kohala Estates, ISLAND Hawaii

### GENERAL LOCATION

**B. U.S.G.S. MAP** # H - 14 (64-50)

### DRILLING COMPANY

**C. Big Island Drilling Co.**

### TYPE OF RIG Tool

**D. DRILLING COMPLETED** 4/10/80 DRILLER GAGE THACKER

### E. ELEVATION, msl: Top of drilling platform 10 ft.  
**Height of drilling platform above ground surface** 3 ft.  
**ft. elevation:**

### F. HOLE SIZE:

- **10 inch dia. to 105 ft. below drilling platform.**
- **8 inch dia. to 415 ft. below drilling platform.**

### G. CASING INSTALLED:

- **10 in. I.D. x 250 ft. wall solid section to 15 ft. below drilling platform.**
- **4" PVC in. I.D. x 250 ft. wall perforated section to 410 ft. below drilling platform.**

### H. ANNULUS:

- **Grouted 102 ft. to 12 ft. below drilling platform.**
- **Gravel packed**

### I. PERMANENT PUMP INSTALLATION:

- Pump type, make, serial no. NO INFORMATION, TO BE Installed by owner, at a later date.
- **Motor type, H.P., voltage, r.p.m.**
- **Depth of pump intake setting**
- **Depth of bottom of airline**  
  **which elevation is** ft.

## HYDROLOGY

**J. INITIAL WATER LEVEL** 395 ft. below drilling platform  
**Date of measurement** 1/17/80

### K. INITIAL CHLORIDE:

- **1320 ppm, total depth of well** 412 ft. below drilling platform

### L. PUMPING TESTS:

- **Reference point (R.P.) used in pumping test**
- **Start water level** 390 ft. below well
- **End water level** 394 ft. below R. P.
- **Depth of well** 412 ft. below R. P.

<table>
<thead>
<tr>
<th>Elapsed Time (hours)</th>
<th>Rate (gpm)</th>
<th>Drawdown (ft.)</th>
<th>Temp. °F</th>
<th>Elapsed Time (hours)</th>
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## M. DRILLER'S LOG:

### Rock Description & Remarks

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<th>Depth (ft.)</th>
<th>Top soil &amp; red sand.</th>
<th>Volcanic boulders, hard.</th>
<th>40 to 51 blue basalt, blue.</th>
<th>51 to 55 red gravelly clay.</th>
<th>55 to 65 fractured basalt.</th>
<th>66.5 to 82 fractured basalt.</th>
<th>102 to 112 sandstone, soft.</th>
<th>112 to 140 fractured basalt.</th>
<th>140 to 147 cinders, soft.</th>
<th>147 to 151 blue basalt, caving.</th>
<th>151 to 184 basalt, medium hard &amp; pukas.</th>
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<td>40 to 51</td>
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</tbody>
</table>

### Water Level

<table>
<thead>
<tr>
<th>Depth (ft.)</th>
<th>294 to 315 Cinders, red, Soft, caving.</th>
<th>315 to 318.5 basalt, blue.</th>
<th>318.5 to 319 caving</th>
<th>319 to 351 basalt, blue.</th>
<th>351 to 370 basalt soft.</th>
<th>370 to 376 cinders.</th>
<th>373 to 375 Fractured caving.</th>
<th>375 to 377 cinders, caving.</th>
<th>377 to 393 Basalt, soft &amp; medium.</th>
<th>393 to 412 Cinders &amp; water @ 394.</th>
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<tbody>
<tr>
<td>290 to 351</td>
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### N. REMARKS:

**INSTRUCTIONS:** Send three(3) copies to: Manager-Chief Engineer, Division of Water and Land Development, P. O. Box 373, Honolulu, Hawaii 96809.


**FOR OFFICIAL USE**

| Latitude | 64°50'01" |
| Longitude | 158°40'01" |
| Well No. | 0680-01 |
**WATERWELL - TEST PUMP REPORT**

Conducted By: **Big Island Drilling**  
Owner: **VIRGIL PLACE**  
Address:  
Well Location: **KOHALA STATES**  

**Well Information:**  
- Total Depth: **410 ft**  
- Depth of Casing: **412 ft**  
- Screen From: **392 ft** To **412 ft**  
- Casing Size: **4 in**  
- Screen Dia: **4 in**  
- Screen Slot: **1/8 x 8 in**  

**Remarks:**  

**Pump Information:**  
- Intake Depth: **407 ft**  
- Pump Size: **5 HP**  
- Air Line Depth:  
- Static Water Level: **394 ft**  
- Avg. Discharge: **12 GPM**  
- Max. Drawdown:  

**Pump On:**  
- Time: **1005**  
- Date: **12/12/80**  
- Pump Off: **0700**  
- Time: **15/15/80**  

<table>
<thead>
<tr>
<th>Time</th>
<th>Water Level</th>
<th>Piezo- Tube</th>
<th>Flow GPM</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/12/80 394'</td>
<td>3</td>
<td>1320 PPM</td>
<td>C</td>
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<tr>
<td>1550 394</td>
<td>3</td>
<td>1440 PPM</td>
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<td>1645 394</td>
<td>5</td>
<td>1560 PPM</td>
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<td>1/13/80 394</td>
<td>5</td>
<td>1320 PPM</td>
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<td>1105 394</td>
<td>5</td>
<td>1320 PPM</td>
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<td>1/14/80 0800 394</td>
<td>5</td>
<td>1320 PPM</td>
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<td>1200 394</td>
<td>7</td>
<td>1320 PPM</td>
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<tr>
<td>1400 394</td>
<td>10</td>
<td>1320 PPM</td>
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<td>1/15/80 394</td>
<td>12</td>
<td>1260 PPM</td>
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</table>
WELL COMPLETION DIAGRAM
VIRGIL PLACE/ SOUTH KOHALA ESTATES. LOT # 9.

SURFACE

SURFACE CASING 6 5/8" I.D.

CEMENT

CEMENT BASKET set @ 102' from surface.

Casing CENTRALIZER set @ 108' from surface.

Casing 4" I.D. P.V.C. Sch. 40.

Casing CENTRALIZER set @ 375' from surface.

Liner OR SLOTTED CASING 20' (1/8 x 8" slots.)

Shoe T.D. 412'.

6450-01
NOTICE OF INTENT TO DRILL

WELL NAME: PLACE / SO. "KOHALA ESTATES" ISLAND HAWAII

OWNER OF WELL: Virgil A. Place Lot #9 "KOHALA ESTATES"
Mailing Address: 2041 Ordean Dr., Hilo, HI 96720

DRILLING COMPANY: BIG ISLAND DRILLING CO
Mailing Address: 908 Box 29, Pahoa, HI

Proposed Construction Date: July 18
Proposed Completion Date: August 20, 1979

PROPOSED USE OF WELL:
(a) Domestic (X)
(b) Irrigation
(c) Industrial (type)
(d) Cooling (type)
(e) Disposal (type)
(f) Other (specify)

Proposed Depth: 350 ft

LOCATION OF WELL: (Attach copy of USGS topographic map, plantation field map, road map, or prepared drawing showing exact location. If not available, prepare a hand-drawn sketch map (not necessarily to scale) in the space below showing sufficient landmarks, distances, and directions for location in the field)

Date Submitted: 7/16/79
Signature of Owner: Andrus Place
Title (If Applicable): Austaeo

FOR DRILLER'S USE
Job Name: PLACE / SO Kohala
Job No.: ____________________________

INSTRUCTIONS: Send three (3) copies to: Manager-Chief Engineer, Division of Water and Land Development, P. O. Box 373, Honolulu, HI 96809.


FOR OFFICIAL USE
Latitude: ____________________________
Longitude: __________________________
Well No.: ____________________________
NOTICE OF INTENT TO DRILL

WELL NAME: PLACE/SO "KOHALA ESTATES" ISLAND HAWAII

OWNER OF WELL: Virgil A. Place / LOT #9 "KOHALA ESTATES"
Mailing Address: 201 Ortega, Lakeview, Ca. 92540 / Box 4636, Kona, Hi 96743

DRILLING COMPANY: BIG ISLAND DRILLING CO
Mailing Address: P.O. Box 29, PAHoa, HI

PROPOSED USE OF WELL:
(a) Domestic ........................................
(b) Irrigation ......................................
(c) Industrial (type) .................................. (d) Cooling (type)
(e) Disposal (type) ..................................
(f) Other (specify) ..................................

PROPOSED CONSTRUCTION DATE: JULY 18
PROPOSED COMPLETION DATE: AUGUST 20, 1979

LOCATION OF WELL: (Attach copy of USGS topographic map, plantation field map, road map, or prepared drawing showing exact location. If not available, prepare a hand-drawn sketch map (not necessarily to scale) in the space below showing sufficient landmarks, distances, and directions for location in the field)

Kawaihae

Date Submitted: 7/16/79
Signature of Owner: ...........................................................................
Title (If Applicable): ...........................................................................

FOR DRILLER'S USE
Job Name: PLACE/SO KOHALA
Job No. ..................................................

INSTRUCTIONS: Send three (3) copies to: Manager-Chief Engineer, Division of Water and Land Development, P. O. Box 373, Honolulu, HI 96809.


FOR OFFICIAL USE
Latitude ..........................................
Longitude ..........................................
Well No. ..........................................

...
NOTICE OF INTENT TO DRILL

WELL NAME: Place/So. "Kohala Estates" Island: Hawaii

OWNER OF WELL: Viorel A. Place

DRILLING COMPANY: Big Island Drilling Co

PROPOSED USE OF WELL:
(a) Domestic X
(b) Irrigation
(c) Industrial (type)
(d) Cooling (type)
(e) Disposal (type)
(f) Other (specify)

LOCATION OF WELL: (Attach copy of USGS topographic map, plantation field map, road map, or prepared drawing showing exact location. If not available, prepare a hand-drawn sketch map (not necessarily to scale) in the space below showing sufficient landmarks, distances, and directions for location in the field)

Date Submitted: 7/16/79

Signature of Owner: [Signature]
Title (If Applicable): [Title]

INSTRUCTIONS: Send three (3) copies to: Manager-Chief Engineer, Division of Water and Land Development, P. O. Box 373, Honolulu, HI 96809.