The Honorable William W. Paty, Chairperson
Commission on Water Resource Management
Department of Land and Natural Resources
State of Hawaii
P.O. Box 621
Honolulu, Hawaii 96809

Dear Mr. Paty:

SUBJECT: WELL CONSTRUCTION PERMIT APPLICATION
MOLOAA-YOSHIOKA WELL
STATE WELL NO. 1120-05
MOLOAA, KAUAI

Thank you for the opportunity to review the subject document. We have reviewed the application and have the following comments to offer:

1. The permit application indicates that the well will be for domestic use. If the well is to serve 25 or more individuals at least 60 days per year or will have a minimum of 15 service connections, the applicant will be required to comply with the Department's Administrative Rules, Title 11, Chapter 20, "Potable Water Systems."

2. Section 11-20-29 of Chapter 20 requires that a new source of potable water serving a public water system be approved by the Director of Health prior to its use. Such an approval is based primarily upon the submission of a satisfactory engineering report which addresses the requirements set in Section 11-20-29.

3. The applicant notes that the well will be situated upgradient from his cesspool. However, it is not clear where and what kinds of wastewater treatment/disposal systems are in the adjacent parcels. These wastewater systems should be identified and located to determine their potential impact upon the proposed well.

We would highly recommend that well operator routinely test the water for nitrates and microbiological contaminants to ensure that there is no wastewater contamination.
CHECKLIST

**WELL CONSTRUCTION PERMIT**

**WELL NAME or LOCATION:** Moleaa - Yoshioka Well

**WELL NUMBER:** 1120-05

**OWNER or OPERATOR:** A. Yoshioka

**ADDRESS:** P.O. Box 930

Haleiwa, HI 96714

**TELEPHONE (contact person):** __________

Date application received: 2-7-90

Date acknowledged receipt/request more info.: 2-14-90

Date application accepted: ____________________

Suspense date (90 days): 2-14-90

Date filing fee deposited: ____________________

Application sent to following:

<table>
<thead>
<tr>
<th>Dept. of Health</th>
<th>Date sent</th>
<th>Comments received</th>
</tr>
</thead>
<tbody>
<tr>
<td>County water board/dept</td>
<td>3-1-90</td>
<td>______________</td>
</tr>
</tbody>
</table>

Date agenda due: ____________________

Date submittal due: ____________________

Date submittal sent to applicant: ____________________

Date application approved or disapproved: 3-14-90

Date applicant notified of decision: 3-14-90

REMARKS: ______________________________________________________

________________________________________________________________

________________________________________________________________
May 8, 1990

Mr. Akitatsu Yoshioka
P.O. Box 930
Hanalei, Kauai 96714

Dear Mr. Yoshioka:

The Commission on Water Resource Management has requested its staff to notify well owners in the Moloaa Bay area whenever a well construction permit for that area is issued. The recent increase in well drilling activity in the area and the possibility of contamination of the wells from nearby cesspools in the same area has triggered the request.

Well construction permits have been issued for the following wells in the Moloaa Bay area:

1. Moloaa-Lawhead Well (Well No. 1120-03)
2. Moloaa-Altemus Well (Well No. 1120-04)
3. Moloaa-Yoshioka Well (Well No. 1120-05)
4. Moloaa-Perius Well (Well No. 1120-06)

The first three wells have been drilled. The fourth has not and may not be drilled. A fifth well construction permit for Moloaa-Mattson Well (Well No. 1120-07) will be acted upon by the Commission at their regularly scheduled meeting on May 16, 1990, at 2:00 p.m. at the State Office Building, Conference Rooms B & C, 3060 Eiwa Street, Lihue, Kauai.

We recommend that well owners and those using water from the wells in the Moloaa Bay area NOT drink the well water unless it is properly tested and treated.

If you have any questions, please contact Ed Sakoda at 548-7543.

Sincerely,

[Signature]

MANABU TAGOMORI
Deputy Director

ES:bm
cc: Department of Health
     Safe Drinking Water Branch
**DESCRIPTION**

Date of report: April 18, 1971  
Person filing report: TIMMY WILLIAMS

A. OWNER:  
Name: Kai Tatsu Yoshihara  
ISLAND: KAUAI

B. GENERAL LOCATION:  
Name: McCullough  
Island: KAUAI

C. DRILLING COMPANY:  
Name: McCullough  
Island: KAUAI

D. TYPE OF RIG:  
DRILLING COMPLETED:  
Driller:  
Timmy Williams

E. ELEVATION, ms: Top of drilling platform: 13 ft.  
Bench mark and method used to determine  
Height of drilling platform above ground surface:  
E. HOLE SIZE:  
inch dia. to:  
ft. below drilling platform.  
inch dia. to:  
ft. below drilling platform.  
inch dia. to:  
ft. below drilling platform.

F. CASING INSTALLED:  
in. I.D. x in. wall solid section to:  
ft. below drilling platform.  
in. I.D. x in. wall perforated section to:  
ft. below drilling platform.

G. ANNULUS:  
Grouted:  
ft. to:  
ft. below drilling platform.

H. TYPE OF PERFORATION:

I. PERMANENT PUMP INSTALLATION:  
- Pump type, make, serial no.  
- Motor type, H.P., voltage, r.p.m.  
- Depth of pump intake setting:  
- Depth of bottom of airline:  
- which elevation is:  
- which elevation is:  

**HYDROLOGY**

J. INITIAL WATER LEVEL:  
f. below drilling platform, Date of measurement:  
Sampling Date:

K. INITIAL CHLORIDE:  
ppm, total depth of well:  
f. below drilling platform:

L. PUMPING TESTS:  
Reference point (R.P.) used:  
which elevation is:  

M. DRILLER’S LOG:

<table>
<thead>
<tr>
<th>Depth (ft.)</th>
<th>Rock Description &amp; Remarks</th>
<th>Water Level</th>
<th>Depth (ft.)</th>
<th>Rock Description &amp; Remarks</th>
<th>Water Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>to 17</td>
<td>Yellow sandstone</td>
<td>ft.</td>
<td>to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to 17</td>
<td>Yellow sandstone</td>
<td>ft.</td>
<td>to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to 18</td>
<td>Gravel</td>
<td>ft.</td>
<td>to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to 25</td>
<td>Gravel</td>
<td>ft.</td>
<td>to</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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:  
Longitude:  
Well No.:  

FOR DRILLER’S USE

Job Name: Yoshihara  
Job No.: 1150-65
1. Well Completion report.
2. Elevation referenced to mean sea level survey by a Hawaii-licensed surveyor.
3. As-built sectional drawing of the well.
4. Plot plan showing the exact location of the well.
5. Complete pumping test record; including time, pumping rate, drawdown, chloride content, and water quality data.

For: Moloaa-Yoshioka Well. 11/20-05

* sorry too late.

$24 Owner's representative Takashi Asai.

P.O. Box 758 M.S.C Kilauea
Hi. 96754.
(phone) (808) 826-4581
(fax) (808) 826-4782
CERTIFICATE OF SURVEYOR

I hereby certify that the top of the well casing at TMK: (4) 4-9-14:11, Moloaa, Kauai, Hawaii is 15.93 feet M.S.L. and the ground elevation as of the below date is 13.43 feet.

Date: May 6, 1990
Lihue, Hawaii

Dennis M. Esaki
Registered Professional Surveyor
Certificate Number 4383
AS BUILT

MOLAA - YOSHIOKA

RECEIVED

GROUND 1-27-86
CEMENT GROUT
FROM 0-73'10''

8 5/8 X .322 inch STEEL PIPE CASING

76'5''

12'' DIAMETER
5 FEET INTO ROCK

OWNED AKITATSU YOSHIOKA

WELL # 11 20 - 05
TAX KEY 4-9 14 11

STATIC WATER LEVEL 12'9''
P.P.M. CHLORIDE 5.7
WATER TEMP. 74°
SURFACE ELEVATION 13.0'
COMPLETED APRIL 17TH 1990

DRILLED BY ALOHA DRILLING
P.O. BOX 281
KILAUEA, KAUAI HI 96751
CONTRACTORS LICENSE #1280 C-57

OPEN HOLE BELOW CASING

80
DATE OF REPORT: APRIL 19, 1990

DESCRIPTION

Date of report: APRIL 19, 1990

Person filing report: JIMMY D. WILLIAMS

A. OWNER: AKITATSU YOSHIKOWA MOLAAI YOSHIKOA

B. GENERAL LOCATION: MOLAAI, KAUA'I

C. DRILLING COMPANY: ALOHA DRILLING P. O. BOX 373, HONOLULU

D. TYPE OF RIG: CYRUS ERIE 22W

E. ELEVATION, msl: Top of drilling platform 130 ft. Bench mark and method used to determine

Height of platform above ground surface 10 ft. elevation: SURVEY

F. HOLESIZE: 13 in. dia. to 74 ft. below drilling platform.

28 in. dia. to 85 ft. below drilling platform.

G. CASING INSTALLED: 8 in. I.D. x 322 in. wall solid section to 76 ft. below drilling platform.

in. I.D. x wall perforated section to ft. below drilling platform.

Type of perforation: NONE

H. ANNULUS: Grouted 74 ft. to 0 ft. below drilling platform.

Gravel packed: NONE ft. to ft. below drilling platform.

I. PERMANENT PUMP INSTALLATION:

- Pump type, make, serial no.: SUBMERSIBLE, GULDS, 2143054126

- Motor type, H.P., voltage, r.p.m.: 1/2 HP, 1/2 hp, 1500 rpm

- Depth of pump intake setting: 72 ft. below T.O.W. CASING: which elevation is 15 ft.

- Depth of bottom of airlne: NONE ft. below which elevation is 15 ft.

HYDROLOGY

J. INITIAL WATER LEVEL: 1219 ft. below drilling platform. Date of measurement: APRIL 18, 1990

K. INITIAL CHLORIDE: 57 ppm, total depth of well 85 ft. below drilling platform APRIL 18, 1990

L. PUMPING TESTS:

<table>
<thead>
<tr>
<th>Date</th>
<th>Rate (gpm)</th>
<th>Drawdown (ft.)</th>
<th>CI (ppm)</th>
<th>Temp. F</th>
</tr>
</thead>
<tbody>
<tr>
<td>APRIL 18, 1990</td>
<td>15</td>
<td>NONE</td>
<td>57</td>
<td>74</td>
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</table>

<table>
<thead>
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<th>Drawdown (ft.)</th>
<th>CI (ppm)</th>
<th>Temp. F</th>
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<tr>
<td>0 to 1 hr.</td>
<td>15</td>
<td>NONE</td>
<td>57</td>
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<tr>
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<th>Rate (gpm)</th>
<th>Drawdown (ft.)</th>
<th>CI (ppm)</th>
<th>Temp. F</th>
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<tr>
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<td></td>
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</table>

SUBSURFACE FORMATION

M. DRILLER'S LOG:

<table>
<thead>
<tr>
<th>Depth, ft.</th>
<th>Rock Description &amp; Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 17</td>
<td>BROWN SAND &amp; CLAY</td>
</tr>
<tr>
<td>17 to 40</td>
<td>YELLOW CORAL</td>
</tr>
<tr>
<td>40 to 68</td>
<td>RED &amp; BLUE CLAY</td>
</tr>
<tr>
<td>68 to 80</td>
<td>BLUE ROCK HARD</td>
</tr>
<tr>
<td>80 to 85</td>
<td>BLUE BROWN ROCK MEDIUM</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Water Level ft.</th>
<th>Depth, ft.</th>
<th>Rock Description &amp; Remarks</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Water Level ft.</th>
<th>Depth, ft.</th>
<th>Rock Description &amp; Remarks</th>
</tr>
</thead>
</table>

N. REMARKS:

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


FOR OFFICIAL USE

State of Hawaii
DEPARTMENT OF LAND & NATURAL RESOURCES
DIVISION OF WATER AND LAND DEVELOPMENT
DRILLER'S REPORT

FOR DRILLER'S USE

Job Name: YOSHIKOWA
Job No.: 1120-05
Moloa - Yoshio Ka
T/C Key 4-9 14 11

Owner Akitatsu Yoshio

Well #11 20-05
Tax Key 4-9 14 11

AS BUILT WELL

8 4/8 X .322 Inch
Steel Pipe casing

12" Diameter
5 Feet into Rock

Static water level 12'9"
P.P.M. Chloride 57
Water Temp. 74°
Surface Elevation 13.0'
Completed April 17th, 1990

Drilled by Aloha Drilling
P.O. Box 281
Kilauea, Kauai HI 96754
Contractors License #12808 C-57

Jimmy D. Williams
AS BUILT PUMP

PUMPING SYSTEM FOR
AKITATSU YOSHIKI
STATE WELL # 1120-05
TAX KEY # 4-9-14-11
MOLOKAI BAY, KAUA'I HI

1/2 H.P. GOULDS SUBMERSIBLE
PUMP MODEL 10EJO541:
FRANKLIN CONTROL BOX

12-3 SUBMERSIBLE PUMP WIRE

30 AMP. DISCONNECT BOX
6.0 AMP. FUSE TRIMS

METER

PUMP 2' LONG

STATIC WATER LEVEL 12'9"
CLORIDE PPM 57
MAXIMUM PUMPING 15 G.P.
WATER TEMP. 74°

INSTALLED BY
ALOHA DRILLING
P.O. BOX 291
KILAUEA, KAUA'I HI

CONTRACTORS LICENSE
# 12008

Jimmy D. Williams
WELL CONSTRUCTION & PUMP INSTALLATION PERMIT

for

Moloaa - Yoshioka Well
Well No. 1120-05
Moloaa, Kauai

TO: Akitatsu Yoshioka
P.O. Box 930
Hanalei, Kauai 96714

In accordance with the Department of Land and Natural Resources Administrative Rules, Section 13-168, entitled "Water Use, Wells, and Stream Diversion Works", your application to construct, test, and install a pump in Moloaa - Yoshioka Well (Well No. 1120-05) within Tax Map Key: 4-9-14:11 for non-potable domestic use is approved subject to the following conditions:

1. The Division of Water and Land Development (DOWALD), Geology-Hydrology Section, shall be notified at 548-7543, before any work covered by this permit commences.

2. The proposed use shall not adversely affect existing legal uses in the area.

3. Water from the well shall not be used for drinking water unless properly tested and treated.

4. The following shall be submitted to DOWALD, P.O. Box 373, Honolulu, Hawaii 96809, within 30 days after completion of the well:

   a. Well Completion Report.

   b. Elevation (referenced to mean sea level) 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 record, including time, pumping rate, drawdown, chloride content, and water quality data.

5. The applicant shall comply with all applicable laws, rules, and ordinances.

6. This permit may be revoked if work is not started within six months of the date of issuance or if work is suspended or abandoned for six months. The work shall be completed within two years of the date of issuance.

MAR 26 1990

Date of Issuance

cc: USGS
   Department of Health
      Drinking Water Branch
      Ground Water Protection Program
   Kauai Department of Water
   Aloha Drilling
March 7, 1990

Mr. Ed Sakoda  
DLNR - DOWALD  
P. O. Box 373  
Honolulu, HI  96809

Re: Application for Well Drilling Permit, Akitatsu Yoshioka, Moloaa Bay - DOWALD Well No. 1120-05, TMK: 4-9-14:11, Moloaa, Kauai

The Department of Water does not have any comments for this State DLNR Well Drilling Permit to drill a new private domestic well in the Moloaa Bay area.

Raymond H. Sato  
Manager and Chief Engineer

GFirm
March 7, 1996

Mr. Akitakeu Yoshioka
P.O. Box 330
Honalei, Kauai 96714

Dear Mr. Yoshioka:

Application for a Well Construction
and Pump Installation Permit
Molosasa-Yoshioka Well, Molosasa, Kauai

The Commission on Water Resource Management will be acting on your
permit application for the Molosasa-Yoshioka Well (Well No. 1852-01) at its
meeting on Thursday, March 15, 1990, 2:00 p.m., at the Kona Surf Hotel,
Mauna Kea Room, 78-128 Ehukai Road, Kailua-Kona, Hawaii.

Your application will be included on the agenda as Item 4 (enclosed).

You or your representative are invited to attend the meeting.

Sincerely,

MANABU TAGOMORI
Deputy Director

ES:ko
Encl.
Honorable John C. Lewin, M.D.
Director
Department of Health
State of Hawaii
1250 Punchbowl Street
Honolulu, Hawaii 96813

Attn: Mr. Thomas Arizumi, Drinking Water Branch

Dear Dr. Lewin:

Well Construction Permit Applications

In accordance with the Department of Land and Natural Resources Administrative Rules, Section 13-168-12(c), we are sending you a copy of the following permit applications for your review.

- Kapoho Airstrip Well (Well No. 3081-01)
- Kalihi-Uka Well (Well No. 2250-02)
- Kuou II Well (Well No. 2348-05)
- Puhi Well (Well No. 5824-05)
- Moloaa-Yoshioka Well (Well No. 1120-05)

Please submit your comments to us, orally or in writing, within three weeks from the date of this letter.

If you have any questions, please contact Manabu Tagomori at 548-7533.

Very truly yours,

WILLIAM W. PATY

Enc.
Mr. Raymond H. Sato  
Department of Water  
County of Kauai  
P.O. Box 1706  
Lihue, Hawaii 96766

Dear Mr. Sato:

Well Construction Permit Application

We are sending you a copy of the following permit application for your review:

Moloaa-Yoshioka Well (Well No. 1120-05)

Please submit your comments to us, orally or in writing, within three weeks from the date of this letter.

If you have any questions, please contact Ed Sakoda at 548-7543.

Sincerely,

[Signature]

MANABU TAGOMORI  
Deputy Director

ES:fc  
Enc.
<table>
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<th>Item No.</th>
<th>Quantity</th>
<th>Description</th>
<th>Price</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td>Gouds Red-Jacket Pump</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td>Model No. 10EJ05412</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td>230 Volts, 0.10 GPM</td>
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<tr>
<td>4.</td>
<td></td>
<td>Control Box Franklin</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td>1/&quot; Pipe</td>
<td></td>
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<tr>
<td>6.</td>
<td></td>
<td>x Well Seal</td>
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</tr>
<tr>
<td>7.</td>
<td></td>
<td>Press. Switch</td>
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<td>8.</td>
<td></td>
<td>0-100 PSI Gauge</td>
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<td>9.</td>
<td></td>
<td>Tank Tee</td>
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<td>10.</td>
<td></td>
<td>Relief Valve</td>
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<td>11.</td>
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<td>12.</td>
<td></td>
<td>1/2&quot; Well Vent</td>
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<td>13.</td>
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<td>14.</td>
<td></td>
<td>Gate Valve</td>
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<td>15.</td>
<td>X</td>
<td>Torque Arrestors</td>
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<tr>
<td>16.</td>
<td>X</td>
<td>Box</td>
<td></td>
</tr>
<tr>
<td>17.</td>
<td>X</td>
<td>x Nipple</td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td></td>
<td>Stand</td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td></td>
<td>x Slab</td>
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<tr>
<td></td>
<td></td>
<td>Tee</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Plug</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Elbow</td>
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<tr>
<td></td>
<td></td>
<td>x Nipple</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>x Nipple</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Misc, wire, conduit &amp; fittings</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Discharge package</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>TOTAL PARTS</td>
<td></td>
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<tr>
<td></td>
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<td>TAX</td>
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<tr>
<td></td>
<td></td>
<td>LABOR</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOTAL</td>
<td></td>
</tr>
</tbody>
</table>

Date: February 3, 1990

Aloha Well Drilling
FACSIMILE TRANSMITTAL PAGE

Please deliver the following pages to:

Name: Mr. Raymond H. Sato
Company: Dept. of Water, County of Kauai
From: DOWALD - Ed Sakoda
Date: 3-6-90 Time: 9:00 am

Message: Please have your staff review this application. I'll call next week for your comments. The driller requested that we "expedite" this application. Sorry for the rush. Ed

Total number of pages (including Transmittal Page): 5

* * * * * * *

If you do not receive all of the pages legibly, please call back: (808) 548-7543

Sending Facsimile Number: (808) 548-6052
Receiving Facsimile Number: (_ _) 141-245-5813
State of Hawaii
DEPARTMENT OF LAND AND NATURAL RESOURCES

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: Kauai  Tax Map Key: 4-4-9-N-11. Attach a plot plan showing well location referenced to established property boundaries.

2. WATER USER: H. Yoshikawa  Telephone: [number]
Address: P.O. Box 980, Hilo, Hawaii 96724

3. PROPOSED DRILLING COMPANY: ALOHA DRILLING LICENS C-57 12883

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):

DRILL 15 INCH HOLE INTO ROCK AT ABOUT 80 FEET.
Cementing: Solid steel casing into rock 5 FEET.
Then Drilling 15 INCH HOLE THROUGH ROCK TO FRESH WATER.

PROPOSED SECTION OF WELL

<table>
<thead>
<tr>
<th>Depth</th>
<th>Material</th>
<th>Length</th>
<th>Diameter</th>
<th>Wall thickness</th>
</tr>
</thead>
<tbody>
<tr>
<td>90 ft</td>
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<td>Total Depth</td>
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*Approximate elev. at filing. Final elev. (masl) 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 14,400 gallons ☐ Monthly _______ gallons ☐ Yearly _______ gallons

7. PROPOSED PUMP OR FLOW CAPACITY: _______ gallons per minute

Signature: [signature] Water Use
Date: __2-6-90____

Signature: [signature] Owner/Operator of Well Site
Date: ____________

For Official Use:
State Well No. 1120-05
DLNR Permit No. ____________
DLNR Application No. ____________
Date: February 3, 1990

Well Dia. Switch
Well Depth 90'
Static Water 10
System G.P.M. 10
Pressure 30-50 system

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<th>Item No.</th>
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<td>1&quot; Pipe</td>
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<td>0-100 PSI Gauge</td>
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<td>Tank Tee</td>
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<td>Relief Valve</td>
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<td>Check Valve</td>
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<td>TOTAL</td>
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</table>
February 14, 1980

Mr. Akitatsu Yoshioka
P.O. Box 930
Hanaelei, Hawaii  96714

Dear Mr. Yoshioka:

We have received your application and $25.00 filing fee for a permit to construct a well (Well No. 1130-05) at Tax Map Key: 4-9-14:11 at Meloaa, Kauai.

We are reviewing your application for completeness and will contact you if we need further information.

If you have any questions, please contact Ed Sakoda at 548-7543.

Sincerely,

[Signature]

MANABU TACCHI
Deputy Director

cc: John Ferry, Bali Hai Realty, Inc.
Moloa—Yoshioka Well
(Well No. 1120—05)
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<tr>
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<th>INITIAL:</th>
<th>PLEASE:</th>
<th>REMARKS:</th>
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<td>M. TAGOMORI</td>
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<td></td>
<td>G. Matsumoto</td>
<td>Take Action By</td>
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<td></td>
<td>G. Akita</td>
<td>Route to Your Branch</td>
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<td></td>
<td>L. Chang</td>
<td>Review &amp; Comment</td>
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<td>Y. Shiroma</td>
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<td>E. Sakoda</td>
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<td>D. Lee</td>
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<tr>
<td></td>
<td>G. Miyashiro</td>
<td>LANDOWNERS</td>
<td></td>
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Not a unit
Molena - Yoshida R (}
February 6, 1990

Department of Land & Natural Resources
P.O. Box 373
HONOLULU HI 96809

Reference: Regulation 9, DLNR

Dear Sirs,

Please find enclosed an application for a well drilling permit, plus a $25.00 filing fee.

If you have any questions, please contact John Ferry at [contact information redacted] the number below.

Yours sincerely,

Mary Paterson
Personal Assistant to
John Ferry

Encl: Application
WELL DRILLING 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 ___________________ Tax Map Key ________________

2. WATER USER Name ___________________________ Telephone ___________________________ Address P.O. Box ____________ Honolulu, Hawaii _____ Zip Code ______

3. PROPOSED DRILLING COMPANY: Aloha Drilling - License C-57 12808

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

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

DRILL 12 INCH HOLE INTO ROCK AT ABOUT 90 FEET.
CEMENTING SOLID STEEL CASING INTO ROCK 5 FEET.
THEN DRILLING 12 INCH HOLE THROUGH ROCK TO FRESH WATER.

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 14,400 gallons ☐ Monthly _______ gallons ☐ Yearly _______ gallons

7. PROPOSED PUMP OR FLOW CAPACITY: ___________________________ gallons per minute

Signature: ___________________________ Date: ____________
Water Use

Signature: ___________________________ Date: ____________
Landowner of Well Site

For Official Use:
State Well No. 1120-05
DLNR Permit No. ___________________________
DLNR Application No. ___________________________
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<td>#12-3 Sub. Cable</td>
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