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Mr. Sterling Kim  
Kula Meadows, LLC  
187 Haulani Street  
Pukalani, Maui, HI 96768  

Dear Mr. Kim:  

Well Completion Report for Well No. 4822-01  

We received your Well Completion Report Part II for the Kula Meadows Well (Well No. 4822-01) on January 3, 2001 and acknowledge that it is complete. This completes your permitting requirements.  

If you have any questions, please contact Charley Ice of the Commission staff at 587-70251 or toll-free at 974-4000 (Hawaii), 274-3141 (Kauai), 984-2400 (Maui), or 1-800-468-4644 (Lanai & Molokai).  

Sincerely,  

LINNEL T. NISHIOKA  
Deputy Director  

Cl:ky  
c. Wailani Drilling
WELL NUMBER: 4822-0
WELL NAME: Kula Meadows

TO: BAUER, G. LUM, A. NAKAMA, L. [Approval]
TO: CHING, F. NAKANO, D. [Signature]
TO: FUJII, N. [Information]
TO: HARDY, R. [Route Slip for Permit Issuance]
TO: HIGA, D. [Suspense Date: 12/19/00]
TO: HIRANO, E. OHYE, M. [See Me]
TO: ICE, C. SAKODA, E. [Review & Comment]
TO: IMATA, R. SUBIA, S. [Take Action]
TO: JINNAI, R. SWANSON, S. [Type Draft]
TO: KUNIMURA, I. UYENO, D. [Type Final]

PLEASE:
1 Review & Comment
2 Type Draft
3 Approval
4 Information
5 File

WELL CONSTRUCTION

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

TO BE SENT TO APPLICANT

FOR OFFICE USE ONLY

PUMP INSTALLATION

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

TO BE SENT TO APPLICANT

FOR OFFICE USE ONLY

Database says application was for well only - is this incorrect? (*1 - corrected 6/July 00
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Gill KulaMaus WCR2.ack
1. **Pump Tests Check** *(special condition of PIP? Yes/No)*

- Glenn Bauer (initial if yes)
  - Yes
  - No
  - If no, describe deficiency

  **Step-Drawdown Test:**
  - followed WCPI Stds
  - analysis attached
  - proposed pump cap o.k.
  
  
  
  
  
  
  
  Data analyzed 11/30/00

  **Aquifer Pump Test:**
  - followed WCPI Stds
  - T & S analysis attached

  **Well Interference:**
  - estimated Steady-State drawdown at 1-mile radius is _______ ft.
  - analysis attached

  **Stream Surface Water Impacted:**
  - If yes, identify most probable stream

2. **Pump Installation Check**

- Mitch Ohye (initial)
  - Yes
  - No
  - If no, describe deficiency

  
  
  
  
  

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

4. Roy (initial) check

5. Susan Subia (initial) finalize

6. Linnel (initial) signature

7. Charley/Lenore/Ryan File
1. State Well No.: 4822-01  
   Well Name: Kula Meadows  
   Island: Maui  

2. Address: Pulehu Gulch, Omaopio  
   Tax Map Key: 2-3-2-5  

3. Pump Installation Company: WAILANI DRILLING  

4. Date Pump Installed: 9/10/00  

5. PERMANENT PUMP INFORMATION  
   Pump Type, Make, Serial No.: Grundfos, Q.55, 400-30, A128600-30  
   Rated Capacity: 85 gpm  
   Motor Type, H.P., Voltage, rpm: Franklin - 23417, 40HP, 460V, 3450 RPM  
   Type of flow meter: TURBINE which measures in GALLONS/Min  

6. Method of flow measurement:  
   Flowmeter  
   Manufacturer: MICROMETER Make: M-2  
   Size: 2"  
   Weir*  
   Open Pipe*  
   Orifice*  
   Other*, explain below  
   *attach schematic  

7. Fill in the as-built section on the other side of this sheet.  

8. Other remarks/comments:  
   IN THIS APPLICATION PUMP ONLY PRODUCES 70 GPM.  

Pump Installation Contractor (print) Mike Robertson- C-57 C-57a/A Lic. No. 20115  
Signature: Mike Robertson  
Date: 12/19/00  

Permittee (print) Sterling F. Kim  
Signature: Sterling F. Kim  
Date: 12/19/00
Bench mark elevation surveyed to nearest 0.01 ft. = 1075.13 ft. mean sea level

Elevation of top of chase tube = 1075.63 ft. mean sea level

Pump intake depth = 1085 ft. (referenced to bench mark)

Chase tube depth = 1085 ft. (referenced to bench mark)

If airline installed, bottom of airline elevation = 414 ft. mean sea level
Dear Mr. Kim:

Pump Installation Permit
Kula Meadows Well (Well No. 4822-01)

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 11:

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, well operator, and/or well owner are responsible for all conditions of the permit. Be advised that you may be subject to fines of up to $1000 per day for any violations of your permit conditions starting from the permit approval date.

Please sign and have the contractor sign both permit originals and return one for our files. A copy of your water use report form is enclosed for your use.

Except for the monthly water use report form, please provide copies of all the information in this packet to your pump installation contractor.

Finally, this letter is notice that we have accepted your Well Completion Report - Part I as complete.

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

Aloha,

TIMOTHY E. JOHNS
Chairperson

Enclosure
c. Wailani Drilling Company
PUMP INSTALLATION PERMIT
Kula Meadows Well, Well No. 4822-01

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 Kula Meadows Well (Well No. 4822-01) at Pulehu Gulch, Omaopio, Maui, TMK 2-3-2.5, subject to the Hawaii Well Construction & Pump Installation Standards (1/23/97) which include but are not limited to the following conditions:

1. The Chairperson 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.

2. The pump installation permit shall be for installation of a 65 gpm capacity, or less, pump in the well.

3. The permittee, well operator, and/or well owner shall provide and maintain an approved meter or other appropriate means for measuring and reporting withdrawals and water levels, and appropriate devices or means for measuring chlorides and temperature. These data shall be measured monthly and reported to the Commission on an annual basis, on forms provided by the Chairperson (attached).

4. The proposed use 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 pump water from a well shall not constitute a determination of correlative water rights. The permittee, well operator, and/or well owner are notified and by this provision understands that the quantity of water taken from the well could be reduced by the Commission in the future. This permit is not a commitment that the pump capacity permitted here or even some lesser amount is guaranteed in the future.

5. The permittee, well operator, and/or well owner shall complete and submit as-built drawings and Part II - (Permanent) Pump Installation Report of the Well Completion Report (attached) to the Chairperson within sixty (60) days after completion of work.

6. 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.

7. The pump installation permit application is incorporated into this permit by reference and is subject to the Hawaii Well Construction & Pump Installation Standards (1/23/97). If the HWCPIS are not followed and as a consequence water is wasted or contaminated, a lien on the property may result.

8. The permit may be revoked if work is not started within six (6) months after the date of approval or if work is suspended or abandoned for six (6) months, unless otherwise specified. The work proposed in the 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 three (3) months prior to the date the permit expires. If the commencement date is not met, the Commission may revoke the permit after giving the permittee, well operator, and/or well owner notice of the proposed action and an opportunity to be heard.

9. If the well is not to be used it must be properly capped. If the well is to be abandoned then the permittee, well operator, and/or well owner must apply for a well abandonment permit in accordance with §13-168-12(f) prior to any well sealing or plugging work.

10. 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.

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

Date of Approval: November 16, 2000
Expiration Date: November 16, 2002

TIMOTHY E. JOHNS, Chairperson
Commission on Water Resource Management

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

Permittee's Signature:________________________________________ Date:__________
Printed Name:________________________________________ Firm or Title:____________________

Installer's Signature:________________________________________ C-57, C-57a, or A License #:__________ Date:__________
Printed Name:________________________________________ Firm or Title:____________________

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

Attachments
C: USGS
Department of Health/ Safe Drinking Water & Wastewater Branch
Maul Department of Water Supply
Wailani Drilling
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Permittee's Signature: [Signature]
Printed Name: Sterling J. Kim
Firm or Title: Project Manager

Installer's Signature: [Signature]
Printed Name: Mike Robertson
Firm or Title: Waianei Drilling

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

Attachments:
USGS
Department of Health
Safe Drinking Water & Wastewater Branch
Maui Department of Water Supply
Waianei Drilling
MEMO and ROUTE SLIP

WCR 1 Check for Well No. 4822-01 (survey to regulation memo)

1. **Pump Tests Check**
   - Glenn Bauer (initial)
   - **Yes** | **No** | If no, describe deficiency
   - Step-Drawdown Test:
     - followed WCPI Stds 
     - analysis attached 
     - proposed pump cap o.k.
   - Aquifer Pump Test:
     - followed WCPI Stds 
     - T & S analysis attached 
   - Well Interference:
     - estimated Steady-State drawdown at 1-mile radius is _______ ft.
     - analysis attached
   - Stream Surface Water Impacted:
     - If yes, identify most probable stream

2. **Construction Check**
   - Mitch Ohye (initial)
   - **Yes** | **No** | If no, describe deficiency
   - data complete 
   - followed WCPI Stds 
   - well database updated

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

4. Roy (initial) check

5. Susan Subia (initial) finalize

6. Linnel (initial) signature

7. Charley/Lenore/Ryan File
Pumping Test No. Constant Rate
Well No. 4822-01
Discharge 13475.00 ft³/d

Transmissivity [ft²/d]: 1.44 x 10⁴
Hydraulic conductivity [ft/d]: 1.44 x 10²
Aquifer thickness [ft]: 100.00
### Pumping Test No. Constant Rate

**Well No:** 4822-01  
**Kula Meadows**  
**Discharge:** 13475.00 ft³/d  
**Distance from the pumping well:** 1.00 ft  

**Static water level:** 1071.75 ft below datum

<table>
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<tr>
<th>Pumping test duration</th>
<th>Static water level</th>
<th>Water level</th>
<th>Drawdown</th>
<th>Corrected drawdown</th>
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<td>[ft]</td>
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<td>1.19</td>
</tr>
</tbody>
</table>
Well Name: Kula Meadows
Date of Test: Sept. 20, 2000
Date of Analysis: 28-Nov-00

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

\[ Q = ft^3/d \]
\[ s = ft. \]
\[ Q1 (gpm) = 70 = 13475 \text{ ft}^3/d \]
\[ Q2 (gpm) = 42 = 8085 \text{ ft}^3/d \]

Set up two equations:

\[ s1 = jQ1 + nQ1^2 \]
\[ s2 = jQ2 + nQ2^2 \]

\[ Q2 = 8085 \text{ s2} = 0.3 \]
\[ Q1 = 13475 \text{ s1} = 0.83 \]

Well Depth below sea level = 59
Radius of well (ft) = 0.5

\[ n = s1 - (Q1/Q2)s2/Q1(Q1-Q2) = 4.5E-09 \]
\[ j = s/Q - nQ = 3.7E-07 \]

Laminar flow equation:

\[ s = jQ = 0.005 \text{ 0.60\%  Head loss due to laminar flow} \]

Thiem Eq.

\[ T = 1/2\pi j(Q/re) \ln(re/r) \]

\[ re = \text{Well Depth BSL} * 1.6 = 94.4 \]

Therefore:

\[ T = 1/2\pi j(Q/re) = 2247849 \text{ ft}^2/d \]
# WELL COMPLETION REPORT - PART I

## Well Construction

**Instructions:** Please print in ink or type and send completed report (with attachments, if applicable) to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. The Commission may not accept incomplete reports. This form shall be submitted within 60 days of the completion of work. For assistance, please consult the Hawaii Well Construction and Pump Installation Standards or call the Regulation Branch at 587-0228. For updates to this form or additional information, please visit our website at [http://www.state.hi.us/dlnr/cwrml](http://www.state.hi.us/dlnr/cwrml).

## 1. State Well No.: 4822-01
Well Name: Kula Meadows
Island: Maui

## 2. Address: Pulehunui-Oma'opio, Wailuku-Makawao
Tax Map Key: 2-3-2:5

## 3. Drilling Company: WAILANI DRILLING

## 4. If drilled, type of Rig: □ Rotary  □ Percussion

## 5. Date Well Construction (drilled, cased, grouted) completed: 9/5/00
*Attach Driller's Log (7/26/99 DL Form)*

## 6. Initial water-level encountered: 107.75 ft. below ground
Date and time of measurement: 9/20/00 4:00 PM

## 7. Step-Drawdown Test completed? □ No  □ Yes
*Attach Step-Drawdown Test Form (12/17/97 SDPTD Form)*

## 8. Constant Rate Aquifer Test completed? □ No  □ Yes
*Attach Constant Rate Aquifer Test Form (12/17/97 CRPTD Form)*

Parameters prior to pump test:

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Value</th>
<th>Date and Time of Measurement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water-level</td>
<td>3.40</td>
<td>9/20/00 4:00 PM</td>
</tr>
<tr>
<td>Chloride</td>
<td>60</td>
<td>9/20/00 5:00 PM</td>
</tr>
<tr>
<td>Temperature</td>
<td>72</td>
<td>9/20/00 5:00 PM</td>
</tr>
</tbody>
</table>

## 9. If a pump is not planned to be installed, please describe (below in the remarks section) how well is secured to prevent unauthorized access (example: lockable cover, threaded coupling, etc.)

## 10. Fill in the as-built section on the other side of this sheet.

## 11. Attach plot plan and surveyor's stamped elevation report.

## 12. Remarks:

---

License Driller (print) MIKE ROBERTSON
C-57 Lic. No. C-20115

Signature  
Date 11/4/00

Surveyor (print) EDGARDO V. VALERA
L.P.L.S. Lic. No. 5076

Signature  
Date 11/7/00

Permittee (print) STERLING J. KIM

Signature  
Date 8/4/00
13. AS-BUILT WELLOCATION (Please attach as-built if different from diagram provided below)

Elevation at top of casing 1075.13 ft., msl* (Survey to nearest 0.01 ft.)

Hole Diameter: 12.5 in.

Minimum of 2' Radius & 4" Thick Concrete Pad

Ground Elevation: 1074.81 ft., msl

Bench mark elevation: 1075.13 ft., msl* (Survey to nearest 0.01 ft.)

Cement Grout: 5.20 ft. (min. 70% of distance from ground elevation to top of water surface or 500 ft., whichever is less.)

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

Rock or Gravel Packing:

Material:
- Crushed Basalt
- Rounded Gravel

Water Level Elevation: 3.90 ft., msl*

Total Depth 1135 ft.

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

Open Casing:
- ☐ Perforated ☐ Screen

Material:
- ☐ Crushed Basalt
- ☐ Rounded Gravel

Open Hole:
- Length: 34 ft.
- Diameter: 12.5 in.
- Bottom Elevation: -60.19 ft., msl

Solid Casing: (≥ 90% x (Ground Elev. - Water Level Elev.))
- Length: 108 ft.
- Nominal Diameter: 6.30 in.
- Wall Thickness: 0.280 in.
- Bottom Elevation: -60.19 ft., msl

Open Casing: (≤ 90% x (Ground Elev. - Water Level Elev.))
- Length: 26 ft.
- Nominal Diameter: 6.50 in.
- Wall Thickness: 0.280 in.
- Bottom Elevation: -60.19 ft., msl

*msl = mean sea level

4827.01 KULA MEADOWS
### Table 1 (SDPTD Form 12/17/97)

**STEP-DRAWDOWN PUMP TEST DATA**

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

<table>
<thead>
<tr>
<th>Pumped Well No.</th>
<th>Pumped Well Name</th>
<th>Observation well no.</th>
<th>Distance between Obs. &amp; Pumped Well</th>
<th>Target Q</th>
<th>Reference pt. for depth to water</th>
</tr>
</thead>
<tbody>
<tr>
<td>4822-01</td>
<td>Kula Meadows</td>
<td>NA</td>
<td>NA ft.</td>
<td>70 gpm</td>
<td>1075.65 ft. msl</td>
</tr>
</tbody>
</table>

**Water level measurements by:**
- [ ] steel tape
- [ ] pressure transducer
- [ ] airline

**START TEST**
- Date: 9/20/80
- Time of day: 4:00 PM

**Flow Meter Reading Start:** 50 gals

<table>
<thead>
<tr>
<th>Suggested Elapsed Time (min)</th>
<th>Actual Elapsed Time (min)</th>
<th>Depth to water (nearest 0.1 ft)</th>
<th>Drawdown (unadjusted to nearest 0.1 ft)</th>
<th>Pumping rate Q (at least 3 steps) (gpm)</th>
<th>EC (μhos)</th>
<th>Cl⁺ (mg/l)</th>
<th>Temp. °F or °C</th>
<th>Remarks</th>
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Remarks: 

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Max possible duration, water level or quality did not stabilize for any 24 period

Begin recovery data next page
Flow meter reading at end of pumped period: 6100 gals

1 starting pumping rate Q
2 minimum length of step period of constant pumping rate
3 minimum mandatory Chloride (Cl⁻) measurement/sampling at end of every step
4 Use same ending drawdown figure as start for recovery
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END TEST  Date: 01/20/00  Time of day: 6:48

ADDITIONAL REMARKS:

Person in charge of pump test (print): Mike Robertson

Signature: Mike Robertson

The signature above indicates that the data reported on this form is accurate and true to the best of the person's knowledge who
## CONSTANT-RATE PUMP TEST DATA

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Data in this table is for:
- Pumped Well
- Observation Well

Remarks
- DD
- NOV 16
- AI: 24

Water level measurements by: 
- Steel tape
- Pressure transducer
- Airline

START TEST Date: 9/21/00  Time of day: 11:15 AM

Flow Meter Reading Start: 6100 gallons

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1 Chloride sampling required
2 Use same ending drawdown figure as start for recovery

Max possible duration, water level or quality did not stabilize for any 24 period

Begin recovery data next page
Flow meter reading at end of pumped period: 413,500 gals
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<th>Suggested elapsed</th>
<th>Actual elapsed</th>
<th>Depth to water</th>
<th>Recovery Drawdown</th>
<th>Pumping rate</th>
<th>Temp.</th>
<th>Data in this table is for:</th>
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<td>time (min)</td>
<td>(nearest 0.1 ft)</td>
<td>(unadjusted to nearest 0.1 ft)</td>
<td>(gpm)</td>
<td>V or °C</td>
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END TEST  Date: 9/26/00  Time of day: 12:10 PM

ADDITIONAL REMARKS:

Person in charge of pump test (print):  Mike Robertson

Signature:  Mike Robertson

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

Re: Well Elevation
Kula Meadows Subdivision
TMK: (2) 2-3-02:05

This is to certify that the observed elevation of the concrete casing of the well head is 1075.13 feet above mean sea level based from Triangulation Station "PUU O KOHA" as established by trigonometric leveling.

If you have any question, please give me a call.

Wailuku, Maui, Hawaii

Piedad V. Valera
Licensed Professional Land Surveyor
State of Hawaii Certificate No. 5076

Please Note: This is the elevation of top of casing and well head slab.

The reference point for measurements was a little higher because we had a P.U.C. nipple screwed into the well head.
Wailani Drilling Company

Mike Robertson 655 Kulike Road Haiku, Maui, Hawaii 96708
Ph. 808-572-2673 Fax 572-0925 Cellular 264-7079 11/13/00

1075.65 ft. m.s.l. Kula Meadows Well State Well #4822-01 Page 2

460 470 480 490 500 510 520 530 540 550 560 570 580 590 600

Hard Blue Rock

6 in. Louvered casing set @ 1081 ft. to 1101 borehole cuttings settled back in to 1101

605 700 750 800 850 900 950

Mediun Blue Rock

Hard Blue Rock

Soft Blue Rock 1110-1123 water bearing

Hard Blue Rock

1170 1180 1190

Total Depth Drilled 1136 ft.

Total finished depth 1101 ft.

*Note: not drawn to scale
Wailani Drilling Inc.  Lic.#57-20115
Mike Robertson  655 Kulike Road  Haiku, Maui, Hawaii 96708
Ph.808 572-2673  Fax 572-0925  Cellular 264-7079

9/22/00

To: Charlie Ice
For: State of Hawaii Water Resource Commission
RE: Theoretical Lense Thickness and Drilling Depths

I want to thank the staff for reviewing and recommending approval of the West Kuiaha-Smith Well #2 permit application in light of the information I have provided to the water commission.
We will notify the water commission in advance of pump testing to facilitate staff observation.

Also some other information which will be of interest to you. We are in the second day of the Kula Meadows pump test. We are only pumping 70 gpm but the chlorides have gone from 60 ppm down to 50 and are holding stable. The water temp. is 71 degrees F. This well was drilled to the same relative depth to sea level as the Omaopio-Esty Well less than 1500 ft. away which tested at 190 ppm chlorides initially and remained at 190 till the end of the test. The 2 wells are however separated by a small gulch.

Sincerely,  
Mike Robertson  
President

c.c. Kent Smith,  
Ian Smith,  
Peter Martin,  
Steve Bowles,  
John Mink

Certified By And A Member Of The National Ground Water Association
FAX MEMO

For: Charlie Ice
From: Mike Robertson
Re: Cover Sheet: Hard copies to follow in the mail.

Working right now on Kula Meadows well log. Chlorides and draw down still holding the same.

Thank you: Mike Robertson

9 pages including this one.
Mr. Sterling Kim  
Kula Meadows, LLC  
187 Haulani Street  
Pukalani, Hawaii 96768  

Dear Mr. Kim:  

Well Construction Permit  
Kula Meadows Well (Well No. 4822-01)  

We received a request on your behalf from Mike Robertson of Wailani Drilling Company, on August 14, 2000, to install the permanent pump prior to issuance of a Pump Installation Permit, in accordance with Commission declaratory ruling DEC-ADM98-G5, for pumps of less than 70-gpm capacity, subject to removal if pump tests do not support the installed capacity.  

By this letter, the request is approved. All the other conditions of your permit still apply, and we look forward to the results from pump testing at the completion of well construction.  

If you have any questions, please call Charley Ice at 587-0251 or toll-free at 924-2400, extension 70251.  

Sincerely,  

LINNELL T. NISHIOKA  
Deputy Director  

Cl:ss
Dear Charlie:

This is to provide written notice for starting work on the following well:

Kula Meadows Well, Well No. 4822-01
Owner also wants to take advantage of the declaratory ruling # DEC-ADM98-G5
because proposed pump is rated less than 70 g.p.m.
Enclosed is the signed well construction permit.

Please fax a response to me to confirm.

Thank You;

Mike Robertson
dba Wailani Drilling Inc.

cc: Sterling Kim

Certified By The National Groundwater Association
COMMISSION ON WATER RESOURCE MANAGEMENT

FROM: Charley                       DATE:  16 Aug 00                  SUSPENSE DATE

TO: BAUER, G.                      INIT.          TO: NAKAMA, L.                   INIT.          FOR: Approval
      FUJII, N.                      ______________        NAKANO, D.                  ______________       Signature
     HARDY, R.                      PG              NISHIOKA, L                     ___       Information
     HIGA, D.                        ___                 OHYE, M.                     ___
     HIRANO, E.                      ___                 SAKODA, E.                    ___
     IMATA, R.                      ___                 SUBIA, S.                      ___
     JINNAI, R.                      ___                 YODA, K.                       ___

PLEASE:
   ___ See Me
   ___ Review & Comment
   ___ Take Action
   ___ Type Draft
   ___ Type Final
   ___ File
   ___ Xerox ___ copies

Gil 4822-01. HR

I thought we might have seen the hard copy by now!
WELL CONSTRUCTION PERMIT
Kula Meadows Wastewater Well No. 4822-01

In accordance with the Department of Land and Natural Resources, Division of Water, the document authorizes the construction and operation of a well at the specified location. The permit is valid until 11/11/2002. The following conditions must be met:

1. The permit holder must submit a well construction report to the Department of Land and Natural Resources within 30 days of well construction.
2. The well construction report must include a detailed description of the well, including the design and construction methods.
3. The permit holder must ensure that all necessary permits and approvals are obtained before commencing construction.
4. The well construction must comply with all applicable state and local laws and regulations.
5. The permit holder must ensure that the well is properly sealed and capped after construction.
6. The permit holder must ensure that the well is properly labeled and identified.

Date of Approval: August 11, 2000
Expiry Date: August 11, 2002

Permittee's Signature: [Signature]
Printed Name: [Name]
Firm or Title: [Company]

Order's Signature: [Signature]
Printed Name: [Name]
C-57 License #: [License Number]

Please note that this permit may be suspended or revoked in the event of non-compliance with any of the permit conditions.
Dear Mr. Kim:

Well Construction Permit
Kula Meadows Well (Well No. 4822-01))

Enclosed are two (2) copies of your approved Well Construction Permit for the captioned well(s) that 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 13:

**Special Conditions**

1. Attached for your information is a copy of the Department of Health's (DOH) review comments. Please note DOH's requirements related to discharge of effluent from well drilling and testing activities.

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

"Permanent pump installation for capacities between 0-70 gpm and where the proposed use is for private individual needs in non-ground-water management areas may be allowed prior to the final pump installation permit issuance. When required as a condition of the well construction permit, subsequent pumping tests shall validate the acceptability of the permanent pump. The permanent pump installed prior to final pump installation permit issuance is subject to removal if the testing shows that a smaller pump is required to reduce the potential of affecting neighboring wells and localized upconing at the applicant's well."
If you qualify and wish to take advantage of this ruling, please include a written request to install the permanent pump prior to final pump installation permit issuance when you return to us your validated well construction permit.

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

IMPORTANT - Drilling work may not proceed without a fully signed permit returned to the Commission. Please provide all the information in this packet to your well drilling contractor. The permittee, well operator, and/or well owner are responsible for all conditions of the permit. This includes ensuring that the well construction contractor, or other party who constructs the well(s), submits a completed Part I of the Well Completion Report form (enclosed) within sixty (60) days after the well construction work is completed. Be advised that you may be subject to fines of up to $1000 per day for any violations of your permit conditions, starting from the date of this permit approval.

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

Aloha,

TIMOTHY E. JOHNS
Chairperson

Enclosures

c: Wailani Drilling Company
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 Kula Meadows Well (Well No. 4822-01) at Pulehu Road, Makawao, Maui, TMK 2-3-2.5, subject to the Hawaii Well Construction & Pump Installation Standards (12/23/87) which include but are not limited to the following conditions:

1. The Chairperson of the Commission on Water Resource Management (Commission), P.O. Box 621, Honolulu, HI 96809, shall be notified, in writing, at least two (2) weeks before any work authorized by this permit commences and staff shall be allowed to inspect installation activities in accordance with §13-168-15, Hawaii Administrative Rules.

2. The well construction permit shall be for construction and testing of the well only. A minimum one-inch diameter monitor tube shall be permanently installed, in a manner acceptable to the Chairperson, to accurately record water levels. The permittee, well operator, and/or well owner shall coordinate with the Chairperson and conduct a pumping test in accordance with the Standards (a pumping testing worksheet is attached). The permittee, well operator, and/or well owner shall submit to the Chairperson the test results as a basis for supporting an application to install a permanent pump and withdraw water for use. No permanent pump may be installed until a pump installation permit is approved and issued by the Chairperson.

3. In basal ground water, the depth of the well may not exceed one-fourth (1/4) of the theoretical thickness (41 times initial head) of the basal ground water unless otherwise authorized by the Chairperson.

4. The permittee, well operator, and/or well owner shall incorporate mitigation measures to prevent construction debris from entering the aquatic environment, to schedule work to avoid periods of high rainfall, and to revegetate any cleared areas as soon as possible.

5. In the event that subsurface cultural remains such as artifacts, burials, or concentrations of shells or charcoal are encountered during construction, the permittee, well operator, and/or well owner shall stop work and contact the Department's Historic Preservation immediately.

6. The proposed well construction shall not adversely affect existing or future legal uses of water in the area, including any surface water or established instream flow standards. This permit or the authorization to construct the well shall not constitute a determination of correlative water rights.

7. The following shall be submitted to the Chairperson within sixty (60) days after completion of work:
   b. Elevation (referenced to mean sea level, msl) survey by a Hawaii-licensed surveyor.
   c. As-built sectional drawing of the well.
   d. Plot plan and map showing the exact location of the well.
   e. Complete pumping test records, including time, pumping rate, drawdown, chloride content, and other data.

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

9. The well construction permit application is incorporated into this permit by reference and is subject to the Hawaii Well Construction & Pump Installation Standards (January 23, 1997; HWCPIS). If the HWCPIS are not followed and as a consequence water is wasted or contaminated, a lien on the property may result.

10. The permit may be revoked by the Commission if work is not started within six (6) months after the date of approval or if work is suspended or abandoned for six (6) months, unless otherwise specified. The work proposed in the well construction permit application shall be completed within two (2) years from the date of permit approval, unless otherwise specified. The permit may be extended by the Chairperson upon a showing of good faith and good-faith performance. A request to extend the permit shall be submitted to the Chairperson no later than three (3) months prior to the date the permit expires. If the commencement date is not met, the Commission may revoke the permit after giving the permittee, well operator, and/or well owner notice of the proposed action and an opportunity to be heard.

11. If the well is not to be used it must be properly capped. If the well is to be abandoned then the permittee, well operator, and/or well owner must apply for a well abandonment permit in accordance with §13-198-12(f) prior to any well sealing or plugging work.

12. The permittee, its successors, and assigns shall indemnify, defend, and hold the State of Hawaii harmless from and against any loss, liability, claim, or damage for property damage, personal injury, or death arising out of any act or omission of the applicant, assign, officers, employees, contractors, and agents under this permit or relating to or connected with the granting of this permit.

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

Date of Approval: August 11, 2000
Expiration Date: August 11, 2002

TIMOTHY E. JOHNS, Chairperson
Commission on Water Resource Management

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

Permittee's Signature: ___________________________ Date: _____________
Printed Name: ___________________________ Firm or Title: _____________
Driller's Signature: ___________________________ C-57 License #: _____________ Date: _____________
Printed Name: ___________________________ Firm or Title: _____________

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

Attachment c: USGS
Department of Health Safe Drinking Water, Wastewater, and Clean Water Branches
Maul Department of Water Supply
TO: Honorable Bruce S. Anderson, Director
Department of Health
Attention: Dennis Tulang, Wastewater Branch
William Wong, Safe Drinking Water Branch

FROM: Timothy E. Johns, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
Kula Meadows Well (Well No. 4822-01)

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 July 28, 2000.

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

Class: Attachment(s)

RESPONSE: Based on discussions with developer, Item 8 of application is new incorrectly answered.

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: Malini J. Hamano Phone: 586-4200
Signed: Malini J. Hamano Date: 8/19/00
TO: Honorable Bruce S. Anderson, Director
Department of Health
Attention: Dennis Tulang, Wastewater Branch
William Wong, Safe Drinking Water Branch

FROM: Timothy E. Johns, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
Kula Meadows Well (Well No. 4822-01)

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 July 28, 2000.

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

CLASS
Attachment(s)

RESPONSE: BASED ON DISCUSSIONS WITH DEVELOPER, ITEM 8 OF APPLICATION IS INCORRECTLY ANSWERED.

This well serves 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, §11-20-10.

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 preventers by physically separating potable and non-potable systems by an air gap or an approved backflow preventer, and by clearly labeling all non-potable supplies 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: Muriel I. Hamana Phone: 586-4268

Signed: Muriel I. Hamana Date: 8/1/00
FAX TRANSMITTAL LETTER

DATE: AUG. 9, 2000

TIME: ____________________ ( ) AM ( ) PM

TRANSMITTED BY: Wayne

TO: CHARLEY ICE

COMM COMMISSION ON WATER RESOURCE MANAGEMENT

ATTENTION: CHARLEY

FAX NO.: 587-0219

RE: KULA MEADOWS WLU* 4822-01 (PUEHU)

MESSAGE:

CC. STERLING Kim f: 573-1032

870 2034

Number of pages being transmitted (including transmittal page): 2

IF THERE ARE ANY PROBLEMS IN RECEIVING THIS FAX, PLEASE CALL (808) 242-5868.
August 9, 2000

Charley Lee
Commission on Water Resource Management
State of Hawaii
Department of Land and Natural Resources
P.O. Box 621
Honolulu, Hawaii 96809

Dear Charley,

Re: Kula Meadows Well (Well No. 4822-01)

This is a memo request. When the well permit is granted, would you be able to send me a fax copy. Please use the following address:

Wayne I. Arakaki, Engineer
P.O. Box 884
Wailuku, Maui, Hawaii 96793

Fax No. (808) 242-5865
Phone No. (808) 242-5868

We would like to thank you for your effort, on your help with this project. Please give me a call if you have any questions or require additional information.

Sincerely,

Wayne I. Arakaki

cc. Sterling Kim
SEE COPY OF PER IN LIBRARY
I anticipate response from Dot during my absence. The applicant has arranged w/ crvill to begin ASAP. While I don't anticipate a Spec. Cond #2, it may be deleted, and the permit date entered.

NO: This is the 1st draft.

Susan, this was previously drafted 7/14/00 - I don't know why it got submitted w/o review.
TO: Honorable Bruce S. Anderson, Director  
Department of Health  
Attention: Dennis Tulang, Wastewater Branch  
William Wong, Safe Drinking Water Branch  

FROM: Timothy E. Johns, Chairperson  
Commission on Water Resource Management  

SUBJECT: Well Construction Permit Application  
Kula Meadows Well (Well No. 4822-01)  

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 July 28, 2000.  

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

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: Lei N. Kajiwara  
Phone: 586-2929  

Signed:  

Date: 1-25-2000
TO: Dean Y. Uchida, Administrator  
Land Division  
FROM: Linnel T. Nishioka, Deputy Director  
Commission on Water Resource Management  
SUBJECT: Well Construction/Pump Installation Permit Application  
Kula Meadows Well (Well No. 4822-01)  

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

We would appreciate your comments on the captioned with regard to the programs, plans, and objectives specific to your division. Please respond by returning this cover memo form by July 28, 2000.

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

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: Original source of title is Land Commission Award No. 5230.

Contact Person: Gary Martin  
Phone: 587-0421

Signed:  
Date: JUL 27
Mr. Sterling Kim  
Kula Meadows, LLC  
187 Haulani Street  
Pukalani, HI 96788  

Dear Mr. Kim:

**Well Construction / Pump Installation Permit Application for Well No. 4822-01**

We acknowledge receipt, on June 26, 2000, of your completed well construction / pump installation permit application for the Kula Meadows Well (Well No. 4822-01). 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 Charley Ice of the Commission staff at 587-0251 or toll-free at 984-2400, extension 70251.

Sincerely,

[Signature]

LINNEL T. NISHIOKA  
Deputy Director

Cl:ss
TO: Honorable Bruce S. Anderson, Director
    Department of Health
    Attention: Dennis Tulang, Wastewater Branch
    William Wong, Safe Drinking Water Branch

FROM: Timothy E. Johns, Chairperson
    Commission on Water Resource Management

SUBJECT: Well Construction Permit Application
    Kula Meadows Well (Well No. 4822-01)

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 July 28, 2000.

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

 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, §11-20-9.

[ ] This well does not qualify as a source serving a public water system (serves less than 25 people or more people at least 60 days per year or 15 service connections) and if the well water is used for drinking, the private owner should test for bacteriological and chemical presence before initiating such use and routinely monitor the water quality thereafter. However, if future planned use from this source increases to meet the public water system definition then Director of Health approval is required prior to implementation.

[ ] If the well is used to supply both potable and non-potable purposes in a single system, the user shall eliminate cross-connections and backflow connections by physically separating potable and non-potable systems by an air gap or an approved backflow preventer, and by clearly labeling all non-potable spigots with warning signs to prevent inadvertent consumption of non-potable water. Backflow prevention devices should be routinely inspected and tested.

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

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

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

[ ] No comments/objections

Contact Person: __________________________________________ Phone: __________________________

Signed: __________________________________________ Date: __________________________
TO: Dean Y. Uchida, Administrator  
Land Division
FROM: Linnel T. Nishioka, Deputy Director  
Commission on Water Resource Management
SUBJECT: Well Construction/Pump Installation Permit Application  
Kula Meadows Well (Well No. 4822-01)

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We would appreciate your comments on the captioned with regard to the programs, plans, and objectives specific to your division. Please respond by returning this cover memo form by July 28, 2000.

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

Ct:ss  
Attachment(s)

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

Contact Person: ____________________________ Phone: ____________________________
Signed: ____________________________ Date: ____________________________
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<th>FROM: Charley</th>
<th>DATE: 17 July 00</th>
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<td>INIT.</td>
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<td>FUJII, N.</td>
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<td>OHYE, M.</td>
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<td>JINNAI, R.</td>
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<td>YODA, K.</td>
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COMMISSION ON WATER RESOURCE MANAGEMENT

3Feb00

4822-01. ack

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**REMARKS:**

**LINE (1)** Well No. 5751-01 (WCPA/PTPA)

**LINE (2)** Well No. 1123-06 (WCPA/PIPA)

**LINE (3)** Well No. 1120-31 (WCPA/PIPA)

**LINE (4)** Well No. 4822-01 (WCPA/PIPA)

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<tr>
<td>TNWRE INC.</td>
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<tr>
<td>MARRY NORRIS</td>
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<td>RUSSELL BRAND</td>
</tr>
<tr>
<td>WAYNE ARAKAKI ENGINEER</td>
</tr>
<tr>
<td>MENEFUNE WATER CO., LTD.</td>
</tr>
</tbody>
</table>

(5) Well No. 2358-35, 36. 46 (WUPA)

(6) Well No. 2358-44 (WUPA)
WAYNE I. ARAKAKI, ENGINEER

DATE JUNE 20, 2000

PAY TO THE ORDER OF DEPT. OF LAND AND NATURAL RESOURCES

TWENTY-FIVE AND NO/100 DOLLARS

CENTRAL PACIFIC BANK

FOR Kula Meadows Well App.

WAYNE I. ARAKAKI
WE ARE SENDING YOU □ Attached □ Under separate cover via __________________ the following items:

☐ Shop drawings  ☐ Prints  ☐ Plans  ☐ Samples  ☐ Specifications
☐ Copy of letter  ☐ Change order  ☐ __________________

<table>
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<th>DESCRIPTION</th>
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<td>Revised Application for Permit Well Construction</td>
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THESE ARE TRANSMITTED as checked below:

☐ For approval  ☐ Approved as submitted  ☐ Resubmit____ copies for approval
☐ For your use  ☐ Approved as noted  ☐ Submit____ copies for distribution
☐ As requested  ☐ Returned for corrections  ☐ Return____ corrected prints
☐ For review and comment  ☐ __________________

☐ FOR BIDS DUE ___________ 19____ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS

In my original application I omitted item No. 4. My revised application shows 65 gallons per minute. Please call me should you have any questions.

Wayne I. Arakaki, P.E.
# State of Hawaii
## COMMISSION ON WATER RESOURCE MANAGEMENT
### Department of Land and Natural Resources

### 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) 242-5865
- **(a) WELL OWNER**
  - Firm Name: Kula Meadows, LLC
  - Contact Person: Wayne I. Arakaki Ph: 242-5868
  - Address: P.O. Box 884
  - Wailuku, HI, 96793

- **(b) LANDOWNER**
  - Firm Name: Kula Meadows, LLC
  - Contact Person: Sterling Kim
  - Address: 187 Haulani Street
  - Pukalani, HI, 96768

- **(c) CONTRACTOR** (Pending Approval)
  - Firm Name: ____________________________
  - Ph: ____________________________
  - Address: ____________________________
  - Contractor's License No: ____________________________

  *(Please circle type: C-57, Gen.'C', or C-57a, Gen.'A')*

### 2. WELL LOCATION/NAME: Pulehu Island: Maui
- Address: Pulehu Road, Kula, Maui, HI.
- Tax Map Key: (2) 2-3-02
- *(2) 2-3-02:05*

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

### 3. (a) PROPOSED WORK: Drill New Well
- **(b) WELL TYPE:**
  - Field Checked By: ____________________________ Date: ____________
  - Date Accepted: ____________
  - Field Checked By: ____________________________ Date: ____________

- **PROPOSED AMOUNT OF WITHDRAWAL:** 100,000 gallons per day

### 4. PROPOSED PUMP INFORMATION:
- **Pump Type:**
  - Deep Well Turbine
  - Deep Submersible
  - Centrifugal
  - Motor:
    - Diesel
  - Electric, rated horsepower: ____________

- **Rated Pump Capacity:** 65 gallons per minute

### 5. PROPOSED USE:
- **(a) Municipal**
- **(b) Domestic**
  - (c) Irrigation (crop)
  - (d) Military
  - Subdivision-Non-portable use

### 6. (a) PROPOSED AMOUNT OF WITHDRAWAL: 100,000 gallons per day
- **(b) METHOD OF FLOW MEASUREMENT:**
  - Flow-meter
  - Open-pipe
  - Orifice Plate
  - Weir

### 7. PENDING ACTIONS:
- **CDUA**
- **DMA**
- **EIS**
- **EA**
- **NONE**
- **Other:**

### 8. REMARKS, EXPLANATIONS:
- Water will be used for non-portable use

This well will service a 16 lot subdivision.

*(If more space is needed, continue on back)*
9. PROPOSED WELL SECTION

Elevation at top of casing 1061.0 ft, msl.

Ground Elevation: 1060.0 ft, msl*

Cement Grout: 1040 ft.

Solid Casing:
- Material: Steel
- Length: 1021 ft
- Diameter: 8 in
- Wall thickness: 0.28 in

Rock Packing 40 ft.

Casing: ☐ Perforated  ☑ Screen
- Material: Steel
- Length: 30 ft
- Diameter: 8 in
- Wall thickness: 0.28 in
- Openings: 20 sq. in./l.f.

Hole Diameter: 12 in.

Total Depth 1090 ft.

Open Hole:
- Length: 10'-0" ft
- Diameter: 12 in

*Approximate elevation at time of filing application. Ground elevation above mean sea level (msl) by a surveyor licensed by the State must be submitted at start of construction. Final elevations of well components shall be submitted in the well completion/well abandonment reports.
DATE: June 22, 2000

TO: Charley Ice
Commission on Water Resource Management

FAX NO. 587-0219

NO. OF PAGES BEING TRANSMITTED 2
(INCLUDES COVER SHEET)

SUBJECT: Application for Permit - Well Construction

MESSAGE:

I mailed out a Application for Permit - Well Construction for Kula Meadows, LLC. I omitted Item No. 4. You should be receiving the application in today's mail. I revised the application to include item No. 4 as 65 gallons per minute. This revised application will be mailed out today. Call me should you have any questions.

SENDER: /s/ Wayne I. Arakaki
APPLICATION FOR PERMIT

Well Construction or Pump Installation

Instructions: Please print in ink or type, attach required maps and send completed application & two (2) copies to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96803. 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) 242-5865
(a) WELL OWNER

Name: Kula Meadows, LLC
Contact Person: Wayne I. Arakaki
Address: P.O. Box 884
Wailuku, HI 96793

(b) LANDOWNER

Name: Kula Meadows, LLC
Contact Person: Sterling Kim
Address: 187 Haulani Street
Fukalani, HI 96768

(c) CONTRACTOR (Pending Approval)

Name ____________________ Fax ____________________ (Please circle type: C-57, Gen'C, or C-57a, Gen'A)
Contact Person ____________________
Address ____________________
Contractor’s License No. ____________________

2 WELL LOCATION/NAME: Pulehu Island Maui
Address Pulehu Road, Kula, Maui, HI.

Tax Map Key (2) 2-3-02:02:03

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

3 (a) PROPOSED WORK: D New Well D Deepen D Install New Pump
D Modify Existing Well D Redel D Modify Pump
D Abandon/Seal * D Replace Pump

* Be sure to complete and submit well abandonment report upon completion of work.

(b) WELL TYPE:
D Drilled D Bored D Driven D Rejected D Radial

Is this well a part of a battery of wells? Yes No

(Briefly describe and fill in the diagram on the back of this form)

4 PROPOSED PUMP INFORMATION: Rated Pump Capacity: 65 gallons per minute

Motor:

Pump Type
D Deep Well Turbine D Rotary D Propeller D Diesel
D Submersible D Rotary-Displacement D Reciprocating D Gas
D Centrifugal D Rotary-Gear D Impulse D Electric, rated horsepower:

If Pump Replacement, Existing Pump Capacity: ______ gallons per minute

5 PROPOSED USE:
D Municipal (including hotels, stores, etc.) D Industrial
D Domestic (individual, non-commercial water use) D Dwelling Units
D Irrigation (crop) D Acres
D Military D Other Subdivision-Non-portable use

6 (a) PROPOSED AMOUNT OF WITHDRAWAL: 100,000 gallons per day
(b) METHOD OF FLOW MEASUREMENT: Flow meter

7 PENDING ACTIONS:
D CDUA D SMA D EIS D EA D NONE D Other (explain)
Completion Date: ____________________

8 REMARKS, EXPLANATIONS: Water will be used for non-portable use.

This well will service a 16 lot subdivision.

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/bandonment report within 30 days after the completion date of the permitted work, 3) monthly water use data shall be submitted to the Commission, and 4) such approval shall 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 Kula Meadows, LLC
Signature ____________________ Date June 9, 2000

Landowner Kula Meadows, LLC
Signature ____________________ Date June 9, 2000

Contractor (Pending Approval)
Signature ____________________ Date

For Official Use Only
Date Received ____________________ Date Accepted ____________________
Field Checked By ____________________ Date ____________________

Longitude ____________________ Latitude ____________________ Aquifer System Name ____________________ State Well No. ____________________
APPLICATION FOR PERMIT

Instructions: Please print in ink or type, attach required maps, and send the completed application & two (2) copies to the Commission on Water Resources Management, P.O. Box 521, 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) 242-5865
   (a) WELL OWNER
   Firm/Name Kula Meadows, LLC
   Contact Person Wayne I. Arakaki Ph: 242-5868
   Address P.O. Box 884
   Wailuku, HI. 96793
   (b) LANDOWNER
   Firm/Name Kula Meadows, LLC
   Contact Person Sterling Kim Ph: 572-0109
   Address 187 Haulani Street
   Pukalani, HI. 96768
   (c) CONTRACTOR (Pending Approval)
   Firm/Name Ph:
   Contact Person 
   Address 

2. WELL LOCATION/NAME: Pulehu Island Maui
   Address Pulehu Road, Kula, Maui, HI.
   Tax Map Key (2) 2-3-02:05
   Attach the relevant portion of (a) a 7.5-Minute Series USGS topographic map (scale 1"=24,000), and (b) a property tax map, showing well location referenced to established property boundaries.

3. (a) PROPOSED WORK: 
   Drill New Well
   Deepen
   Install New Pump
   Modify Existing Well
   Redrill
   Modify Pump
   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 this form.)

4. PROPOSED PUMP INFORMATION: Rated Pump Capacity: ___ gallons per minute
   Pump Type: 
   Deep Well Turbine
   Rotary
   Submersible
   Centrifugal
   Deep Well Turbine
   Rotary
   Submersible
   Centrifugal
   Other:
   If Pump Replacement, Existing Pump Capacity: ___ gallons per minute
   Motor:

5. PROPOSED USE: 
   Municipal (including hotels, stores, etc.)
   Industrial
   Domestic (individual, noncommercial water sys.)
   # Dwelling Units
   # Acres
   Irrigation (crop)
   Other
   Military
   Other
   Subdivision-Non-portable use
   Other Explanations:

6. (a) PROPOSED AMOUNT OF WITHDRAWAL: 100,000 gallons per day
   (b) METHOD OF FLOW MEASUREMENT:
   Flow-meter
   Open-pipe
   Orifice Plate
   Weir
   Completion Date:

7. PENDING ACTIONS: 
   0 CDUA
   0 SMA
   0 EIS
   0 EA
   0 NONE
   0 Other (explain)
   (If more space is needed, continue on back)

8. REMARKS, EXPLANATIONS: Water will be used for non-portable use
   This well will service a 16 lot subdivision.

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 Kula Meadows, LLC
Signature ____________________________ Date June 9, 2000

Landowner Kula Meadows, LLC
Signature ____________________________ Date June 9, 2000

Contractor (Pending Approval)
Signature ____________________________ Date 

For Official Use Only:
Date Received ____________________
Date Accepted ____________________
Field Checked By ____________________ Date ____________________
Longitude ____________________ Latitude ____________________
Aquifer System Name ____________________ State Well No. ____________

3 Jan 97 WCPIA Form
9. PROPOSED WELL SECTION

Elevation at top of casing
1061.0 ft., msl.

Ground Elevation: 1060.0 ft., msl

Cement Grout: 1040 ft.

Rock Packing: 40 ft.

Hole Diameter: 12 in.

Casing: Steel

Material: Steel

Length: 1021 ft.

Diameter: 8 in.

Wall thickness: 0.28 in.

Casing: Perforated

Material: Steel

Length: 30 ft.

Diameter: 8 in.

Wall thickness: 0.28 in.

Openings: 20 sq. in./ft.

Open Hole:

Length: 10' - 0"

Diameter: 12 in.

*Approximate elevation at time of filing application. Ground elevation above mean sea level (msl) by a surveyor licensed by the State must be submitted at start of construction. Final elevations of well components shall be submitted in the well completion/well abandonment reports.
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- may be hard to locate given maps. need to determine aquifer this well is within.
TO Commission on Water Resource Management

P.O. Box 621

Honolulu, HI. 96809

WE ARE SENDING YOU □ Attached □ Under separate cover via . the following items:

□ Shop drawings   □ Prints   □ Plans   □ Samples   □ Specifications
□ Copy of letter □ Change order

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These are transmitted as checked below:

XX For approval □ Approved as submitted □ Resubmit____ copies for approval
□ For your use □ Approved as noted □ Submit_____ copies for distribution
□ As requested □ Returned for corrections □ Return_____ corrected prints
□ For review and comment □

FOR BIDS DUE ____________ 19 ____________ PRINTS RETURNED AFTER LOAN TO US

Remarks

Wayne I. Arakaki, P.E.
May 3, 2000

Land Use and Codes Administration
County of Maui
250 S. High Street
Wailuku, HI 96793

Re: Kula Meadows LLC Subdivision
TMK: (2) 2-3-002-005

Gentlemen:

This letter authorizes Wayne I. Arakaki to act on behalf of Kula Meadows LLC relating to the subdivision processing required for the subject parcel in accordance with the requirements of applicable County ordinances, standards, rules and regulations.

Sincerely,

Kula Meadows LLC

By Arnold D. Feuerstein
Its Manager, Arnold D. Feuerstein

STATE OF CALIFORNIA  )
COUNTY OF ORANGE  ) SS.

On this 5th day of May, 2000, before me appeared Arnold D. Feuerstein, Trustee of the Feuerstein Community Property Trust executed April 13, 1982, to me personally known, who being by me duly sworn, did say that he is the manager of KULA MEADOWS LLC, a Hawaii limited liability company, and that this instrument was signed on behalf of said limited liability company by authority of its manager, and the said manager acknowledged this instrument to be the free act and deed of said limited liability company.

Notary Public, State of California
My commission expires: