MEMO TO FILE:
Lahaina Recreation Center Well (Well No. 5240-08)

A telephone request from the new Maui Parks Director for background information on this well led to the discovery that, while it had been duly registered May 30, 1989, there was no documentation about the well construction itself.

Subsequently, the Director contacted the original driller for the information found in this folder, and conducted his own measurements for the specific location of the well. CWRM staff have not verified these facts in the field.

Pumpage from this well has been reported along with all other Parks & Recreation wells, by estimate (capacity times duration of pumpage). A program to install flow meters in each well was initiated in 2001.

This well was the only one of the Parks wells that had not been assigned a number. It has been assigned the next available number.
August 22, 2003
Mr. Charles Ice
Commission on Water Resource Management
P.O. Box 621
Honolulu, Hawaii 96809
Phone: (808) 587-0225
(808) 587-0274

Mr. Ice:

Here is the information that you requested concerning the original irrigation well at the Lahaina Recreation Center. The letter from Beylik Drilling Inc., Hawaii Division was a great help in putting the facts and figures together. The form for the "Registration of Well and Declaration of Water Use" is filled except for the line that asks about the Reference point (used to measure depth of water). I was unable to determine what the Roscoe Moss company had used in the original drilling and pump installation. I have included the report that was made when the Roscoe Moss company reinstalled the pump after it had failed. To the best of my knowledge the submersible pump that is in operation at this time is the third pump that has been used in that well. The Chloride information was taken from water samples that were processed by the County of Maui Department of Water Supply Laboratory. If you have need of further information please let me know. Thank you for your attention to this matter.

Randy Gentry
Department of Parks & Recreation
Planning and Development Division
May 20, 2003

Dept. of Parks & Recreation  
700 Hali‘a Nakoa St., Unit 2  
Wailuku, HI 96793

Attn: Mr. Randy Gentry

Subj: Lahaina Irrigation Well

Dear Mr. Gentry:

Thank you for your inquiry for information on the Lahaina Irrigation Well. Attached is the Well Completion Report from our file. The information you requested is as follows:

- Pump HP: 15
- Size of Casing: 8" ID
- Pump Depth: 36'-3"
- Total Well Depth: 45'

If you have any questions or need further information, please feel free to contact me at 682-5554.

Sincerely,

Dwight Ho
General Manager

DH:If

Attachment
PART II. (PERMANENT) PUMP INSTALLATION REPORT

20. Pump Installation Company: Roscoe Moss Hawaii, Inc.

21. Name of person performing work: John Mole

22. Date Pump Installation Completed: April 30, 1997

23. PUMP INSTALLATION:
   Pump Type, Make, Serial No.: Submersible, Pleuger, 4343929108
   Motor type, H.P., Voltage, rpm: Submersible, 208, 3450
   Depth of Pump Intake Setting 35 ft. below Head, which elevation is 20 ft.
   Depth to bottom of airline 33 ft. below Head, which elevation is 20 ft.
   Pumping Head is 280 ft. Type of flow meter: Turbine which measures in Gal

24. As-built drawings attached attached? Yes No

25. Other remarks/comments: (See below)

Pump Installation Contractor (print) Roscoe Moss Hawaii, Inc. C-57 Lic. No. C-16437

Signature William C. Moore, Vice President

Applicant (print) William C. Moore

Signature

Date 5/12/97

8.(cont'd) DRILLER'S LOG (cont'd):

   Water Level Dates to
   Depth (ft.)
   Rock Description, Remarks,

   Water Level Dates to
   Depth (ft.)
   Rock Description, Remarks,


ENTRACED IN WELLS - ON 9-4-03

WCR 2
WELL COMPLETION REPORT

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

3/20/96 WCR Form

Instructions: Please print or type and submit completed report within 30 days after well completion to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96820. An as-built drawing of the well and chemical analysis should also be submitted. For assistance call the Commission Regulation Branch at 587-0225, or 1-800-468-4644 Extension 70225.

1. State Well No.: \( S240-01 \)
   Well Name: __________
   Island: Maui

2. Location/Address: Lahaina Rec Center
   Tax Map Key: __________

PART I - WELL CONSTRUCTION REPORT

3. Drilling Company: ____________________________
4. Name of driller who performed work: __________
5. Type of rig/construction: ______________________
6. Date(s) Well Construction and pump tests (if any) completed: __________
7. GROUND ELEVATION (referenced to mean sea level, msl): __________ ft.
   Well Bench Mark (description/location): __________
   Elevation(msl): __________ ft.
8. DRILLER'S LOG: Please attach geologic log (if available or if required by permit)
   Depths (ft.) Rock Description, Water Level, Dates, etc. Depths (ft.) Rock Description, Water Level, Dates, etc.
   ______ to ________ ______ to ________
   ______ to ________ ______ to ________
   (If more space is needed, continue on back.)
9. Total depth of well below ground: __________ ft.
10. Hole size: __________ inch dia. from __________ ft. to __________ ft. below ground
    __________ inch dia. from __________ ft. to __________ ft. below ground
    __________ inch dia. from __________ ft. to __________ ft. below ground
11. Casing installed: __________ in. I.D. x __________ in. wall solid section to __________ ft. below ground
    __________ in. I.D. x __________ in. wall perforated section to __________ ft. below ground
    Casing Material/Slot Size: __________
12. Annulus: Grouted from __________ ft. below ground to __________ ft. below ground
    Gravel packed from __________ ft. below ground to __________ ft. below ground
13. Initial water level: __________ ft. below ground.
    Date and time of measurement: __________
14. Initial chloride: __________ ppm
    Date and time of sampling: __________
15. Initial temperature: __________ °F
    Date and time of measurement: __________
16. PUMPING TESTS: Reference Point (R.P.) used: __________, which elevation is __________ ft.
    (1) Step-Drawdown Test Date __________
    Start water level __________ ft. below R.P.
    End water level __________ ft. below R.P.
    (2) Long-term Aquifer Test Date __________
    Start water level __________ ft. below R.P.
    End water level __________ ft. below R.P.
17. Aquifer Pump Test Procedures data & graphs (1/9/96 LTAT Form) attached? __ Yes __ No
18. As-built drawings attached? __ Yes __ No
19. Other remarks/comments: (On back of this form)

Well Drilling Contractor (print) ____________________________ C-57 Lic. No. __________
Signature ____________________________ Date __________
Surveyor (print) ____________________________ Lic. No. __________
Signature ____________________________ Date __________
Applicant (print) ____________________________
Signature ____________________________ Date __________
SUBMERSIBLE BOWL & MOTOR INSTALLATION DRAWING

6-5240-08 LAHAINA REC. CENTER
INSTALLED: APRIL 30, 1997

TO FACE OF FLANGE

3/4" THK

1 1/2" BASE TO 1" OF DISCHARGE

16" O.D. SURFACE PLATE

1 1/2" I.D. OF WELL

3" COLUMN

8/13" POWER CONDUCTOR

BOWL UNIT:

NE65 ASSEMBLY

8 STAGE

1 1/2" O.D. OF BOWLS INCL. CONDUCTOR GUARD

MOTOR:

Plumber MFR. 15 H.P. 208 VOLTS

3 PH. 3490 R.P.M. 5 1/2" MOTOR O.D.

PUMP PERFORMANCE

U.S.G.P.M.-----100
FT. TOTAL HD.- 280
R.P.M.---------3490

PUMP NO. 5-40441-0X
PO. NO. 

TOP VIEW, FOUNDATION BOLT HOLES REQUIRED

3/4" DRILL 4 HOLES ON 14 1/4" B.C. AS SHOWN

16" DIA.
STATE WELL NO.: ___________  
ISLAND: Maui  
WELL NAME OR DESIGNATION: Lahaina Recreation Center/Old Well  
SOURCE OR STATION NAME (For a battery of wells):  

### A. WELL OPERATOR  
Firm Name: Dept. Parks and Rec. West  
Contact Person:  
Address: 700 Halla Naka St., Unit 2  
Wailuku, Hawaii  
Zip: 96793  
Phone (808) 270-7230  

### B. OWNER OF WELL SITE  
Firm name: County of Maui  
Contact Person:  
Address: 200 South High Street  
Wailuku, Hawaii  
Zip: 96793  

### C. WELL LOCATION  
Tax Map Key: 4-6-12:5  
Town, Place, District: Lahaina, Maui, Hawaii  
Attach USGS "Quad" map (scale 1:24,000) tax map, or other map showing the well location.  

### D. WELL DATA  
For Drilled Wells, submit "as built" drawing, drillers log, and pump test results, and complete items below.  
For Tunnels and Shafts, submit construction drawings, plot plan, or sketch map.  

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ground Elevation (Mean sea level)</td>
<td>20 Ft</td>
</tr>
<tr>
<td>Reference point (used to measure depth to water):</td>
<td>N/A ft</td>
</tr>
<tr>
<td>Depth to water (Below reference point):</td>
<td>180 ft</td>
</tr>
<tr>
<td>Maximum recorded chloride:</td>
<td>160 ppm</td>
</tr>
<tr>
<td>Minimum recorded chloride:</td>
<td>110 ppm</td>
</tr>
<tr>
<td>Maximum chloride in 2003:</td>
<td>160 ppm</td>
</tr>
</tbody>
</table>

### E. INSTALLED PUMP DATA  
Pump type: □ Vertical shaft  ■ Submersible  □ Centrifugal  □ Other (specify)  
Power: □ Diesel, __________ HP  □ Gas, __________ HP  ■ Electric, 15 HP  □ Other (specify):  
Pump capacity: 100 gallons per minute  
Pump installation contractor: Roscoe Moss Hawaii Inc.  

For Official Use Only:  
Date Received:  
Date accepted:  
Field checked by:  
Date:  
Latitude:  
Longitud:  
State well no.:  

References: Hawaii Revised Statutes, Chapter 174  
Hawaii Administrative Rules, Chapters 13-167 to 13-171.
NOTE: The purpose of the Declaration of Water Use is to obtain information necessary for the management of the state's water resources. The Declaration does not confer a legal right to water or its use.

Water use data are recorded: □ Daily □ Weekly □ Monthly □ Other (Describe): ________________

Method of measurement: □ Flow Meter □ Orifice □ Other (Describe): ________________

Quantity of Use (Report metered or estimated monthly water use from the well described on the reverse side of this form, for the calendar years 1999 through 2003. For a battery of wells which are not individually metered, but which are connected to a single meter or other measuring device, report total use from the battery):

WATER USE, IN GALLONS X 1000

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
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<th>2001</th>
<th>2002</th>
<th>2003</th>
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<td>January</td>
<td>1756.8</td>
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<td>328.5</td>
<td>849.9</td>
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<td>901.8</td>
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<td>844.2</td>
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<td>928.0</td>
<td>153.4</td>
<td>1394.8</td>
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<td>867.5</td>
<td>743.6</td>
<td>663.9</td>
<td>718.8</td>
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<td>June</td>
<td>954.3</td>
<td>882.4</td>
<td>958.6</td>
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<td>July</td>
<td>1798.5</td>
<td>1568.1</td>
<td>1592.7</td>
<td>1221.7</td>
<td>1693.7</td>
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<td>1392.0</td>
<td>1481.5</td>
<td>1142.2</td>
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<tr>
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<td>921.8</td>
<td>862.3</td>
<td>758.6</td>
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<tr>
<td>October</td>
<td>1250.0</td>
<td>763.2</td>
<td>755.9</td>
<td>713.3</td>
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</tr>
<tr>
<td>November</td>
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<td>891.4</td>
<td>803.0</td>
<td>648.5</td>
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<tr>
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<td>679.4</td>
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<td>562.3</td>
<td>873.7</td>
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<td>9676.6</td>
<td>9525.4</td>
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</tr>
</tbody>
</table>

Minimum day's use: 153.4 gallons Maximum day's use: 1798.5 gallons

Typical times of usage: Nights during the week and hours during the day on unused fields

Type of Use (Check all category boxes that apply and provide additional information as indicated):

- □ Municipal (including resorts, hotels, businesses)
- □ Domestic (systems servicing 25 people or less)
- □ Irrigation
  - Acres irrigated: 8.3
  - Crop(s): □ Sugar □ Pineapple □ Other (specify): ________________
  - Non-Crop: □ Landscape □ Golf Course □ Other (specify): ________________
  - Method: □ Drip □ Furrow □ Sprinkler
- □ Industrial
  - □ Cooling □ Manufacturing □ Mill □ Other (specify): ________________
- □ Military
- □ Other (specify): ________________

I declare that the contents of the above Declaration of Water Use are, to the best of my knowledge and belief, true, correct, and complete.

Water User's Signature: ___________________________ Date: _____________

Printed Name: Glenn T Correa

Firm or Title (Well Operator, etc.): Director, County of Maui, Department of Parks and Recreation
STATE OF HAWAII
COMMISSION ON WATER RESOURCE MANAGEMENT
DEPARTMENT OF LAND AND NATURAL RESOURCES
DIVISION OF WATER RESOURCE MANAGEMENT

REGISTRATION OF WELL
AND DECLARATION OF WATER USE

INSTRUCTIONS: Please type or print. If information is not available or not applicable, indicate as N/A. Fill out as completely as possible, sign, and file form with the Division of Water Resource Management, P.O. Box 373, Honolulu, Hawaii 96809. Phone 548-3948 or 548-7343 for assistance.

BATTERY OF WELLS: For a battery of wells, on the surface, in a tunnel, or in a shaft, submit a registration form for each well together with a single map or plot plan showing layout of wells.

STATE WELL NO.: 5140-07
ISLAND: Maui

WELL NAME OR DESIGNATION: Lahaina Recreational Center

SOURCE OR STATION NAME (For a battery of wells): N/A

A. WELL OPERATOR
Firm name: Parks and Recreation
Contact person: Patrick T. Matsui
Address: 1580 Kaahumanu Avenue
Wailuku, Hi.
Zip: 96793 Phone: 243 7383

B. OWNER OF WELL SITE
Firm name: County of Maui
Contact person: Same
Address: Same
Zip: Phone: 

C. WELL LOCATION
Tax Map Key: 4-6-12(34)
Town, Place, District: Lahaina

D. WELL DATA
For Drilled Wells, submit "as-built" drawing, driller's log, and pump test results, and complete items below.
For Tunnels and Shafts, submit construction drawings, plot plan, or sketch map.

Ground elevation (Mean sea level): 10 ft.(est.)
Reference point (Used to measure depth to water):
Elevation: N/A ft.
Description:

Depth to water (below reference point): " ft.
Maximum recorded chloride: " ppm
Minimum recorded chloride: " ppm
Maximum chloride in 1987: " ppm

For Official Use Only:
Date received: Date accepted:
Field checked by: Date: Latitude: Longitude: Hydrologic Unit:
Comments: ____________________________

E. INSTALLED PUMP DATA
Pump type: Vertical shaft Submersible Centrifugal Other (specify): N/A
Power: Diesel, HP Gas, HP Electric, HP Other (specify): "
Pump capacity: N/A gallons per minute
Pump installation contractor: Roscoe Moss

For Official Use Only:
Date received: Date accepted:
Field checked by: Date: Latitude: Longitude: Hydrologic Unit:
Comments: ____________________________

References: Hawaii Revised Statutes, Chapter 174C.
Hawaii Administrative Rules, Chapters 13-167 to 13-171.
F. DECLARATION OF WATER USE

NOTE: The purpose of the Declaration of Water Use is to obtain information necessary for the management of the State's water resources. The Declaration does not confer a legal right to water or its use.

Water use data are recorded: □ Daily □ Weekly □ Monthly □ Other (describe): N/A

Method of measurement: □ Flow Meter □ Orifice □ Other (describe): N/A

Quantity of Use (Report metered or estimated monthly water use from the well described on the reverse side of this form, for the calendar years 1983 through 1987. For a battery of wells which are not individually metered, but which are connected to a single meter or other measuring device, report total use from the battery):

WATER USE, IN GALLONS x 1000

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<td>ANNUAL</td>
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</tr>
</tbody>
</table>

Minimum day's use: N/A gallons Maximum day's use: N/A gallons

Typical times of usage: 6:00 a.m. to 6:00 a.m.

Type of Use (Check all category boxes that apply and provide additional information as indicated):

- □ Municipal (including resorts, hotels, businesses)
- □ Domestic (systems serving 25 people or less)
- □ Irrigation
- □ Industrial
- □ Military
- □ Other

Additional Information

Acres Irrigated: 13
Crop(s): □ Sugar □ Pineapple □ Other (specify):
Non-Crop: □ Landscape □ Golf Course □ Other (specify): Ball fields
Method: □ Drip □ Furrow □ Sprinkler □ Cooling □ Manufacturing □ Mill □ Other (specify):
Specify (livestock, aquaculture, etc.):

I declare that the contents of the above Declaration of Water Use are, to the best of my knowledge and belief, true, correct, and complete.

Water User's Signature: Patrick T. Matsui Date: 5/30/89
Printed Name: Patrick T. Matsui
Firm or Title (Well Operator, etc.): Park Maintenance Superintendent