Kealii-Naish Well
(5615-07)
**SECTION 1: WELL LOCATION INFORMATION**

<table>
<thead>
<tr>
<th>Island</th>
<th>MAUI</th>
<th>Proposed Use</th>
<th>Irrigation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aquifer System</td>
<td>KOOLAU</td>
<td>Proposed Withdrawal</td>
<td>30000</td>
</tr>
<tr>
<td>Aquifer Sector</td>
<td>HAiku</td>
<td>System Sustainable Yield</td>
<td>31</td>
</tr>
</tbody>
</table>

**SECTION 2: WELL SECTION DATA** (enter data in grey cells only)

<table>
<thead>
<tr>
<th>Elevation at top of casing</th>
<th>281 ft., m.s.l.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ground Elevation</td>
<td>280 ft., m.s.l.</td>
</tr>
<tr>
<td>Cement Grout</td>
<td>280 ft.</td>
</tr>
<tr>
<td>Rock Packing</td>
<td>0 ft.</td>
</tr>
<tr>
<td>Hole Diameter</td>
<td>12.5 in.</td>
</tr>
<tr>
<td>Total Depth</td>
<td>320 ft.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Estimated Head</th>
<th>4.5 ft., m.s.l.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calculated Aquifer Thickness</td>
<td>184.5 ft.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County Water Supply (Y/N ?)</th>
<th>NO</th>
</tr>
</thead>
</table>

**Solid Casing**

<table>
<thead>
<tr>
<th>Material</th>
<th>Designation</th>
<th>Length</th>
<th>Diameter</th>
<th>Wall Thickness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steel</td>
<td>ASTM A53</td>
<td>300 ft.</td>
<td>6 in.</td>
<td>0.28 in.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Casing</th>
<th>Material</th>
<th>Designation</th>
<th>Length</th>
<th>Diameter</th>
<th>Wall Thickness</th>
<th>Openings</th>
<th>sq.in./l.f.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Steel</td>
<td>ASTM A53</td>
<td>20 ft.</td>
<td>6 in.</td>
<td>0.28 in.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SECTION 3: CHECKLIST** *(values to check are shaded)*

**Well Depth**

| Theoretical Thickness of Aquifer | 184.5 ft. |
| 1/4 Aquifer Thickness | 46.13 ft. |
| Depth of Well below Sea Level | 40 ft. |

**Well Casing**

| Minimum Wall Thickness | Steel |
| County or Non-County | non-county |
| Minimum Thickness per standards | #N/A in. |
| Wall Thickness Provided | 0.260 in. |
| Minimum Length of Solid Casing | #N/A |
| 90% of ground to top of aquifer | 248 ft. |
| Length of solid casing Provided | 300 ft. |
| Casing Material | ASTM A53 |

**Annular Space**

| Depth of Grouting | 192.9 ft. |
| Calculated Depth of Grouting | 280 ft. |
| Thickness of Annular Space | 3.25 in. |

*(disregard if the well is not basal, deep monitor or salt water)*

*okay* (refer to HWCPIS Section 2.2)

*okay* (refer to HWCPIS Section 2.4 c) *(disregard if this is a non-county well)*

*okay* (refer to HWCPIS Section 2.4 d)

*okay* (refer to HWCPIS Section 2.4 e)

*okay* (refer to HWCPIS Section 2.6 c) *(if the cell above reads #N/A, reference HWCPIS)*
To: Charley Lee,

Enclosed are the following items.

- Check for Kealii-Naish
- Check for Signed Pump Installation Permit for Kealii-Naish well
- Check for Pump Curve

Hard copies to follow in the mail.

Please confirm receipt by checking off the enclosed items and faxing a copy of this memo to me at 808/322-6797

Thank you.

Sincerely,

Michael Robertson
September 8, 2004

Ms. Kathryn Naish
52 Kaapuni Drive
Kailua, HI 96734

Dear Ms. Naish:

Well Completion Report for Well No. 5615-07

We received your Well Completion Report Part II for the Kealii-Naish Well (Well No. 5615-07) on August 31, 2004 and acknowledge that it is complete. Other than the continuing water use reporting requirement, the permitting requirements for this well are complete.

If you have any questions, please contact Charley Ice of the Commission staff at

Sincerely,

YVONNE Y. IZU
Deputy Director

Cl: ss

c: Wailani Drilling, Inc.
MEMO and ROUTE SLIP

WCR 2 Check for Well No. 5615-07 (survey to regulation memo)

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.
   - [ ]
   - [ ]

   **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**
   - [ ]
   - [ ]

   data complete
   - followed Special Cond & Elev.
   - well database updated
   - [ ]
   - [ ]

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

4. Roy  (initial)  check

5. Subia  (initial)  finalize w/electronic signature

6. Charley/Lenore/Ryan File
State of Hawaii
COMMISSION ON WATER RESOURCE MANAGEMENT
Department of Land and Natural Resources
WELL COMPLETION REPORT - PART II
Pump Installation

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 contact the Hawaii Well Construction and Pump Installation Standards. For updates to this form or additional information, please visit our website at http://www.hawaii.gov/dlnrlcwrm/

<table>
<thead>
<tr>
<th>1. State Well No.:</th>
<th>5415-07</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well Name:</td>
<td>Keali'i Naish</td>
</tr>
<tr>
<td>Island:</td>
<td>Maui</td>
</tr>
<tr>
<td>2. Address:</td>
<td>Keali'i Paniolo, Makawao</td>
</tr>
<tr>
<td>Tax Map Key:</td>
<td>2-8-4-46</td>
</tr>
<tr>
<td>3. Pump Installation Company:</td>
<td>Waterline Drilling Inc</td>
</tr>
<tr>
<td>4. Date Pump Installed:</td>
<td>8/10/04</td>
</tr>
</tbody>
</table>

5. PERMANENT PUMP INFORMATION

Pump Type, Make, Serial No.: Grundfos SSS 75-6 7 1/2 HP
Rated Capacity: 50 gpm at head of: 300 ft
Motor Type, H.P., Voltage, rpm: Franklin Sub 7 1/2 HP, 230V, 3450 RPM
Type of flow meter: Turbine which measures in gals
Model Number: MM 2 Serial Number: MM 250631

Pump type (check one):
- [ ] Deep Well Turbine
- [X] Submersible
- [ ] Centrifugal
- [ ] Rotary
- [ ] Rotary-Displacement
- [ ] Propeller
- [ ] Reciprocating
- [ ] Rotary-Gear
- [ ] Impulse

6. Method of flow measurement:
   - [X] Flowmeter
   - [ ] Manufacturer
   - [ ] Model
   - [ ] Make
   - [ ] 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. Attach photograph of well and concrete pad clearly showing benchmark on concrete pad.
9. Other remarks/comments:


Pump Installation Contractor (print) Michael Robertse
Signature: Michael Robertse
Date: 8/10/04

Permittee (print) KATHRYN NAISH
Signature: KATHRYN NAISH
Date: 7/18/04

WCR2 Form 4/29/03 Page 1 of 2
Bench mark elevation
surveyed to nearest 0.01 ft. = 287.6 ft. mean sea level

Elevation of top of chase tube
287.40 ft. mean sea level

Pump intake depth = 2.99 ft.
(referenced to bench mark)

Chase tube depth = 2.59 ft.
(referenced to bench mark)

If airline installed,
bottom of airline elevation = ? ft. mean sea level
Performance Curves 85 GPM
Model 85S

FLOW RANGE: 18 - 118 GPM
OUTLET SIZE: 3" NPT
NOMINAL DIA. 6"

SPECIFICATIONS SUBJECT TO CHANGE WITHOUT NOTICE.
4" MOTOR STANDARD, 1.5-5 HP/3450 RPM
6" MOTOR STANDARD, 7.5-50 HP/3450 RPM
* Alternate motor sizes available

Performance conforms to ISO 9506 Annex A
@ 5 ft. min. submergence.
PUMP INSTALLATION PERMIT
Keali'i-Naish, Well No. 5615-07

Note: This permit shall be prominently displayed at the site until the work is completed.

In accordance with Department of Land and Natural Resources, Commission on Water Resource Management's Administrative Rules, Section 13-156, entitled "Water Use, Wells, and Stream Diversion Works," this document permits the pump installation for Keali'i-Naish Well No. 5615-07 at lower Keali'i Point Road, Makawao, Maui. TMK 2-6-4-4S, subject to the Hawaii Well Construction & Pump Installation Standards (February 2004) which include but are not limited to the following conditions:

1. The Chairperson to the Commission on Water Resource Management (Commission), P.O. Box 621, Honolulu, HI 96809, shall be notified, in writing, at least two (2) weeks before any work covered by this permit commences and staff shall be allowed to inspect installation activities in accordance with §13-185-15 Hawaii Administrative Rules.

2. The pump installation permit shall be for installation of a 50 gpm rated capacity at 200 ft. of head, 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 recording 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 underground water flow or tender. This permit or the authorization to pump water from a well shall not constitute a determination of conclusive water rights. The permittee, well operator, and/or well owner are notified by the 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 in me 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 result in grounds for revocation of this permit.

7. The pump installation permit is subject to any related state approved application submitted by the Commission are incorporated into this permit by reference. This permit is subject to the Hawaii Well Construction & Pump Installation Standards (February 2004). If the NWCPIS 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 and if work is suspended or abandoned for more than 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 or a fair service performance. A request to extend the permit shall be submitted to the Chairperson no later than thirty (30) days prior to the date the permit expires. If the commencement date is not met, the Commission may revoke the permit allowing the permittee, well operator, and/or well owner to submit an updated application and an opportunity to be heard.

9. If the well is not to be used or it must be properly capped. If the well is to be abandoned then the permittee, well operator, and/or well owner shall supply for a written abandonment permit in accordance with §13-169-120 prior to any well sealing or plugging work.

10. The permittee, its successors, and assignees shall indemnify, defend, and hold the State of Hawaiian 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, assignee, or any employee, contractor, and agent involved in 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: Jun 3, 2004
Expiration Date: Jun 3, 2006

PETER T. YOUNG, 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 those 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 result in fines for each violation and fines not exceeding $5000 per day starting from the permit date of approval.

Permittee's Signature: [Signature] Date: 7/25/04
Printed Name: KATHERYN NAISH Firm or Title: Owner

Installer's Signature: [Signature] Date: 9/26/04
Printed Name: Michael Robert/er, C.G.A. or A License #: 2015 Firm or Title: Well Drilling, Inc.

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

Attachments
- USGS Department of Land and Natural Resources, Hawaii Water Supply Branch
- Well Drilling, Inc.
Return Receipt Fax Memo

To: Charley Iee,

Enclosed are the following items:

- WCR 2 for Kealii - Naish
- Signed Pump Installation Permit for Kealii-Naish well.
- Pump Curve

Hard copies to follow in the mail.

Please confirm receipt by checking off the enclosed items and faxing a copy of this memo to me at 808-

Thank you.

Sincerely,

Michael Robertson
In accordance with Department of Land and Natural Resources, Commission on Water Resource Management's Administrative Rules, Section 13-136, entitled "Water Use, Wells, and Stream Diversion Works", this document permits the pump installation for Keali'i-Naish Well (Well No. 5615-07) at lower Keali'i Point Road, Makawao, Maui, TMK 2B-4:46, subject to the Hawaii Well Construction & Pump Installation Standards (February 2004) which include but are not limited to the following conditions:

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

2. The pump installation permit shall be for installation of a 50 gpm rated capacity at 300 ft. of head, 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 V-2 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 the permit.

7. The pump installation permit application and any related staff submittal approved by the Commission are incorporated into this permit by reference. This permit is also subject to the Hawaii Well Construction & Pump Installation Standards (February 2004). If the HWCPIS are not followed and 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 6 (six) months after the date of approval or if work is suspended or abandoned for 6 (six) 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 or 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, assignee, operators, 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: June 3, 2004
Expiration Date: June 3, 2006

PETER T. YOUNG, 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 undertaking on 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 $5000 per day starting from the permit date of approval.

Permittee's Signature: ____________________________
Printed Name: KATHLEEN Naish
Firm or Title: Owner
Date: 7/25/04

Installer's Signature: ____________________________
Printed Name: Michael Robertson (C-57, G-57a, or A License #: 2015)
Firm or Title: Waianan Dilling, Inc.
Date: 6/26/04

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

Attachments

1. USGS
   Department of Health Safe Drinking Water & Wastewater Branch
   Maui Department of Water Supply
   Waianan Dilling, Inc.
<table>
<thead>
<tr>
<th>Taxkey</th>
<th>Subdiv/Condo</th>
<th>Tnr Property Address</th>
<th>Owner/Lessee</th>
<th>Beds</th>
<th>Baths</th>
<th>Land area</th>
<th>Living area</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-2-8-4-46 Peahi</td>
<td>F HAUMANA RD.</td>
<td>NAISH, ROBERT STAUNTON /ETAL</td>
<td></td>
<td></td>
<td></td>
<td>73.21 ac</td>
<td></td>
</tr>
</tbody>
</table>

This information has been supplied by third parties and has not been independently verified by Hawaii Information Service and is, therefore, not guaranteed.
# WELL COMPLETION REPORT - PART II

## Installation 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 587-0225. For updates to this form or additional information, please visit our website at [http://www.hawaii.gov/dlnr/cwrm/](http://www.hawaii.gov/dlnr/cwrm/)

## 1. State Well No.: 5415-07

<table>
<thead>
<tr>
<th>Well Name</th>
<th>Kealii - Naish</th>
</tr>
</thead>
<tbody>
<tr>
<td>Island</td>
<td>Maui</td>
</tr>
</tbody>
</table>

## 2. Address:

<table>
<thead>
<tr>
<th>Address</th>
<th>Kealii Point, Makena</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tax Map Key</td>
<td>2-8-4-46</td>
</tr>
</tbody>
</table>

## 3. Pump Installation Company:

| Company       | Wailani Drilling Inc |

## 4. Date Pump Installed:

| Date          | 8/10/04 |

## 5. PERMANENT PUMP INFORMATION

<table>
<thead>
<tr>
<th>Pump Type, Make, Serial No.</th>
<th>Grundfos 85S 75-6 7 1/2 HP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rated Capacity</td>
<td>50 gpm at head of: 300 ft.</td>
</tr>
<tr>
<td>Motor Type, H.P., Voltage, rpm</td>
<td>Franklin Sub 7 1/2 HP 230V 3450 RPM</td>
</tr>
<tr>
<td>Type of flow meter</td>
<td>Turbine which measures in gpm</td>
</tr>
</tbody>
</table>

### Pump type (check one):

- [ ] Deep Well Turbine
- [ ] Rotary
- [ ] Propeller
- [ ] Submersible
- [ ] Rotary-Displacement
- [ ] Reciprocating
- [ ] Centrifugal
- [ ] Rotary-Gear
- [ ] Impulse

### Method of flow measurement:

- [ ] Flowmeter  Manufacturer Master Make Master 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. Attach photograph of well and concrete pad clearly showing benchmark on concrete pad.

## 9. Other remarks/comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

## Pump Installation Contractor (print)

Michael Robertson  C-57/C-57a/A Lic. No. 20115

Signature: _____________________________  Date: 8/10/04

## Permittee (print)

Kathryn Naish

Signature: _____________________________  Date: 7/18/04
9. AS-BUILT PL' SECTION (Please attach as-built if different from diagram provided below)

Bench mark elevation surveyed to nearest 0.01 ft. = 289.0 ft. mean sea level

Elevation of top of chase tube 289.40 ft. mean sea level

Pump intake depth = 299 ft. (referenced to bench mark)

Chase tube depth = 299 ft. (referenced to bench mark)

If airline installed, bottom of airline elevation = NA ft. mean sea level
Performance Curves 85 GPM Model 85S

FLOW RANGE: 18 - 118 GPM OUTLET SIZE: 3" NPT NOMINAL DIA. 6"

SPECIFICATIONS SUBJECT TO CHANGE WITHOUT NOTICE.

4" MOTOR STANDARD, 1.5-5 HP/3450 RPM
6" MOTOR STANDARD, 7.5-50 HP/3450 RPM.
* Alternate motor sizes available.

Performance conforms to ISO 9906 Annex A @ 5 ft. min. submergence.
Ms. Kathryn Naish
52 Kaapuni Drive
Kailua, HI 96734

Dear Ms. Naish:

Pump Installation Permit
Keali'i-Naish Well (Well No. 5615-07)

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. This includes ensuring that the pump installation contractor submits a completed Part II of the Well Completion Report form (enclosed) within sixty (60) days after the pump installation work is completed. Be advised that you may be subject to fines of up to $5000 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 the Well Completion Report (Part II) and a copy of your water use report form are enclosed for your use.

**IMPORTANT** - Pump installation shall not commence until a fully signed permit is returned to the Commission. 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 [redacted] or toll-free at [redacted] extension 70251.

Sincerely,

Peter T. Young
Chairperson

Enclosure

c: Wailani Drilling, Inc.
PUMP INSTALLATION PERMIT
Kealii'Naish Well, Well No. 5615-07

Note: This permit shall be prominently displayed at the site until the work is completed

In accordance with Department of Land and Natural Resources, Commission on Water Resource Management's Administrative Rules, Section 13-168, entitled "Water Use, Wells, and Stream Diversion Works", this document permits the pump installation for Kealii'Naish Well (Well No. 5615-07) at lower Kealii Point Road, Makawao, Maui, TMK 2-8-4:46, subject to the Hawaii Well Construction & Pump Installation Standards (February 2004) which include but are not limited to the following conditions:

1. The Chairperson to the Commission on Water Resource Management (Commission), P.O. Box 521, 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 50 gpm rated capacity at 300 ft. of head, 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 and any related staff submittal approved by the Commission are incorporated into this permit by reference. This permit is also subject to the Hawaii Well Construction & Pump Installation Standards (February 2004). 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, assignees, 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: June 3, 2004
Expiration Date: June 3, 2006

PETER T. YOUNG, 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 $5000 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
Maui Department of Water Supply
Wailani Drilling, Inc.
# WELL COMPLETION REPORT - PART II
## Pump Installation

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 For updates to this form or additional information, please visit our website at http://www.hawaii.gov/dlnr/cwrm/

---

## 1. State Well No.: **5615-07**

### Well Name: Kealii-Naish

### Island: Maui

## 2. Address: **Lower Kealii Point Road**

### Tax Map Key: **2-8-4:46**

## 3. Pump Installation Company:

## 4. Date Pump Installed: **Month/Day/Year**

## 5. PERMANENT PUMP INFORMATION

<table>
<thead>
<tr>
<th>Pump Type, Make, Serial No.:</th>
<th><strong>Rated Capacity:</strong> gpm at head of: ft.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motor Type, H.P., Voltage, rpm:</td>
<td></td>
</tr>
<tr>
<td>Type of flow meter:</td>
<td>which measures in</td>
</tr>
<tr>
<td>Model Number</td>
<td>Serial Number</td>
</tr>
</tbody>
</table>

**Pump type (check one):**
- [ ] Deep Well Turbine
- [ ] Submersible
- [ ] Centrifugal

**Method of flow measurement:**
- [ ] Flowmeter
- [ ] Weir
- [ ] Open Pipe
- [ ] Orifice
- [ ] Other*, explain below

*attach schematic

---

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

## 8. Attach photograph of well and concrete pad clearly showing benchmark on concrete pad.

## 9. Other remarks/comments:

---

### Pump Installation Contractor (print) **[Signature]**

**C-57/C-57a/A Lic. No.**

**Date**

### Permittee (print)

**[Signature]**

**Date**

---

**Naile Pip**

**F. 907892-9222**

**(17 Aug 04)**

---

WCR2 Form 4/29/03 Page 1 of 2
9. AS-BUILT PUMP SECTION

(Please attach as-built if different from that provided below)

Bench mark elevation surveyed to nearest 0.01 ft. = __________ ft. mean sea level

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

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

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

If airline installed, bottom of airline elevation = __________ ft. mean sea level
MEMO and ROUTE SLIP

WCR 1 Check for Well No. 5615-07 (survey to regulation memo)

06/16/04

1. **Pump Tests Check**  Glenn Bauer (initial)  

<table>
<thead>
<tr>
<th>Step-Drawdown Test:</th>
<th>Yes</th>
<th>No</th>
<th>If no, describe deficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>followed WCPI Stds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>analysis attached</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>proposed pump cap o.k.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

   | Well Interference:  |    |    |                           |
   | estimated Steady-State drawdown at 1-mile radius is |    |    | |
   | analysis attached |    |    |                           |

   | Stream Surface Water Impacted:  |    |    |                           |
   | Geology Code for Well Index: |    |    |                           |

<table>
<thead>
<tr>
<th>Latitude</th>
<th>Longitude</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAD27</td>
<td>15 5 16.3</td>
</tr>
<tr>
<td>NAD83</td>
<td>15 5 16.3</td>
</tr>
</tbody>
</table>

2. **Construction Check**  Mitch Ohye (initial)  

   | data complete  | Yes | No | If no, describe deficiency |
   | followed Special Cond & elevations |    |    |                           |
   | well database updated |    |    |                           |

<table>
<thead>
<tr>
<th>Latitude</th>
<th>Longitude</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAD27</td>
<td>15 5 16.3</td>
</tr>
<tr>
<td>NAD83</td>
<td>15 5 16.3</td>
</tr>
</tbody>
</table>

3.  (initial) take action based on above analysis

   ATTACHMENTS FOR PUMP INSTALLATION PERMIT:
   - COVER LETTER
   - PERMIT (2x)
   - 3DOH COMMENTS
   - LAND DIV. COMMENTS
   - WCR 2 FORM
   - WUR FORM
   - USGS MAP
   - PARCEL CHECK
   - DATABASE PRINTOUT
   - GLENN'S WORKSHEET
   - WELLS AS-BUILT CHECK PRINT

   not necessary – only WCP.

   To be sent to applicant

4.  (initial) check
5.  (initial) finalize
6.  (initial) signature
7.  (initial) File
Return Receipt Fax Memo

For: Charley Ice
Re: WCR's and PIP's

Charley. Enclosed are the following items:

Signed Well Construction Permit and start work notice for Waihee Equestrian Well # 5731-06

Signed Well Construction Permit and start work notice for Sprecklesville - Ross Well # 5424-11

WCR I For Kaupakalua Upcountry LLC Well 5417-03

WCR II and signed PIP for Nahiku-Harlow Well 4904-01

WCR II and signed PIP for Opana Point 2 Well 5617-03

WCR I For Kealii-Naish Well 5615-07

I apologize for the delay on 2 of these reports. The surveyor had the wells mixed up and had to go back out and re-survey.

Please confirm receipt by checking off the enclosed items and faxing a copy of this memo to me at [redacted]

Thank you:
Michael Robertson
# 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  For updates to this form or additional information, please visit our website at [http://www.hawaii.gov/dlnr/cwrm/](http://www.hawaii.gov/dlnr/cwrm/)

1. State Well No.: **5615-07**  
   Well Name: **Kealii-Naish**  
   Island: **Maui**

2. Address: **Kealii Point, Makawao**  
   Tax Map Key: **2-8-4:46**

3. Drilling Company: **Wai'anae Drilling Inc.**

4. Drilling method used during construction:  
   - Rotary  
   - Percussion  
   - Other (describe)

5. Date Well Construction (drilled, cased, grouted) completed: **3/18/04**  
   Fill out attached Driller's Log

   In addition to the driller's log, if a geologic log was prepared, please submit with this form.

6. Was the subject well cored?  
   - Yes  
   - No

7. Initial water-level encountered **295** ft. below ground  
   Date and time of measurement: **3/4/04**

8. Step-Drawdown Test completed?  
   - No  
   - Yes  
   Attach Step-Drawdown Test form (12/17/97 SDPTD Form)

9. Constant Rate Aquifer Test completed?  
   - No  
   - Yes  
   Attach Constant Rate Aquifer Test form (12/17/97 CRPTD Form)

Parameters prior to pump test:

10. Water-level: **5.39** ft. above msl  
    Date and time of measurement: **3/30/04**

11. Chloride: **140** ppm  
    Date and time of sampling: **3/30/04**

12. Temperature: **69.4** °F  
    Date and time of measurement: **3/30/04**

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

14. Fill in attached surveyor's report.

15. 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.)

16. The proposed manufacturer's rated pump capacity is **50** gpm at a head of **300** ft.  
   (Attach pump specifications and rating curve)

17. Remarks:

---

**Licensed Driller** (print) **Michael Robertson**  
C-57 Lic. No. **20115**

Signature  
**Michael Robertson**  
Date **5/10/04**

**Permittee** (print) **Katherine N. Nishi**

Signature  
**Katherine N. Nishi**  
Date **1-5-03**
13. AS-BUILT WELL SECTION (Please attach as-built if different from diagram provided below)

**Solid Casing Material:**
Carbon Steel: compliant with (check one or more):
- ANSI/AWWA C200
- API Spec. 5L
- ASTM A53
- ASTM A139

And compliant with (check one or more):
- ASTM A242
- Type E
- Type S
- Grade B
- Other

Stainless Steel: (check one):
- ASTM A409 (production wells)
- ASTM A312 (monitor wells)

ABS Plastic conforming to ASTM F480 and ASTM D1527: (check one)
- Schedule 40
- Schedule 80

PVC Plastic conforming to ASTM F480 and (ASTM D1785 or ASTM D2241): (check one)
- Schedule 40
- Schedule 80
- Schedule 120

Thermoset Plastic: (check one)
- Filament Wound Resin Pipe conforming to ASTM D2996
- 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 Material:**
Carbon Steel: compliant with (check one or more):
- ANSI/AWWA C200
- API Spec. 5L
- ASTM A53
- ASTM A139

And compliant with (check one or more):
- ASTM A242
- Type E
- Type S
- Grade B
- Other

Stainless Steel: (check one):
- ASTM A409 (production wells)
- ASTM A312 (monitor wells)

ABS Plastic conforming to ASTM F480 and ASTM D1527: (check one)
- Schedule 40
- Schedule 80

PVC Plastic conforming to ASTM F480 and (ASTM D1785 or ASTM D2241): (check one)
- Schedule 40
- Schedule 80
- Schedule 120

Thermoset Plastic: (check one)
- Filament Wound Resin Pipe conforming to ASTM D2996
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- Glass Fiber Reinforced Resin Pressure Pipe conforming to AWWA C950
- PTFE Fluorocarbon Tubing conforming to ASTM D3296
- FEP Fluorocarbon Tubing conforming to ASTM D3296
## DRILLER'S LOG

### WELL NUMBER: 5615-07

<table>
<thead>
<tr>
<th>Depths (ft.)</th>
<th>Rock Description, Water Level, etc.</th>
<th>Dates</th>
<th>Depths (ft.)</th>
<th>Rock Description, Water Level, etc.</th>
<th>Dates</th>
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<td>Clay (Red)</td>
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</tbody>
</table>

Remarks:
### CONSTANT-RATE PUMP TEST DATA

Pumped Well No. 5615-07  Observation Well No. NKA
Pumped Well Name Keali-Naish  Distance between Obs. & Pumped Well NKA ft.
Target Q 60 gpm  Reference pt. for depth to water 289.40 ft. msl

Water level measurements by:  

- Electrical sounder  
- Pressure transducer  
- Airline

Static Water Level @ start of test 5.39 ft. msl

START TEST Date: 3/30/04  Time of day: 10:00 AM
Flow Meter Reading Start: 7 gallons

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<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 S (unadjusted to nearest 0.1 ft)</th>
<th>Pumping rate Q (gpm)</th>
<th>EC (μmhos)</th>
<th>Cl⁻ (mg/l)</th>
<th>Temp. °F or °C</th>
<th>Remarks</th>
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</tbody>
</table>

Data in this table is for:  

- Pumped Well  
- Observation Well

Remarks:  

- Start test  
- Start pump/Cl⁻ taken  
- 140 69.4
<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 (gpm)</th>
<th>EC (μhos)</th>
<th>Cl⁻ (mg/l)</th>
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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:

26423 gals

1 Chloride sampling required
2 Use same ending drawdown figure as start for recovery
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<th>Actual elapsed time (min)</th>
<th>Depth to water (nearest 0.1 ft)</th>
<th>Recovery Drawdown S (unadjusted to nearest 0.1 ft)</th>
<th>Pumping rate Q (gpm)</th>
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FLOW RANGE: 18-118 GPM
OUTLET SIZE: 3" NPT
NOMINAL DIA. 6"

SPECIFICATIONS SUBJECT TO CHANGE WITHOUT NOTICE.

4" MOTOR STANDARD, 1.5-5 HP/3450 RPM
5" MOTOR STANDARD, 7.5-50 HP/3450 RPM.
* Alternate motor sizes available.

Performance conforms to ISO 9906 Annex A
@ 5 ft. min. submergence.
To: Charley Ice
For: Water Resource Commission
Re: Start Work Notice

Dear Charley:

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

Kealii-Naish Well # 5615-07
Please fax receipt form to me to confirm.

Thank You:

Michael Robertson
WELL CONSTRUCTION PERMIT
Kealii-Naish, Well No. 5615-07

Note: This permit shall be prominently displayed at the site until the work is completed.

In accordance with Department of Land and Natural Resources, Commission on Water Resource Management’s Administrative Rules, Section 13-168, entitled “Water Use, Wells, and Stream Diversion Works”, this document permits the construction and testing of Kealii-Naish (Well No. 5615-07) at Kealii Point, Makawao, Maui, TMK 2-8-4, 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 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 1\(\frac{1}{4}\) -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 pump 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 results, 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 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.

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 §13-168-12(1) 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 demand for property damage, personal injury, or death arising out of any act or omission of the applicant, assignee, operator, 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: December 5, 2003
Expiration Date: December 5, 2005

PETER T. YOUNG, 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 driller 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: [Redacted] Date: 1/22/04
Printed Name: KATHRYN MWAI
Firm or Title: [Redacted]

Driller’s Signature: Michael Robertson
C-57 License #: [Redacted] Date: 1/10/04
Printed Name: Michael Robertson
Firm or Title: Waioli Drilling, Inc.

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
Maui Department of Water Supply
Waioli Drilling, Inc.
Well Site

Well Geographic Location:
Latitude: 20° 56' 11"
Longitude: 156° 15' 53"

PLOT PLAN
(Provide Latitude and Longitude of well referenced to NAD27 to nearest second)

February 19, 2004

BRUCE R. LEE, LPLS
5983-LS
HAWAII HISTORIC PRESERVATION
DIVISION REVIEW

Log #: 2003.2572
Doc #: 0312CD20

Applicant/Agency: Ernest Y.W. Lau, Deputy Director
Address: State of Hawaii
Department of Land and Natural Resources
Commission of Water Resource Management
P.O. Box 621
Honolulu, Hawaii 96809

SUBJECT: Chapter 6E-42 Historic Preservation Review – Well Construction/Pump Installation Permit Application for the Proposed Kealii-Naish Well (Well No.5615-07) [State/COWRM]

Ahupua'a: Keali'i Iki
District, Island: Makawao, Maui
TMK: (2) 2-8-004:046

1. We believe there are no historic properties present, because:

   ____ a) intensive cultivation has altered the land
   ____ b) residential development/urbanization has altered the land
   ____ c) previous grubbing/grading has altered the land
   ___ d) an acceptable archaeological assessment or inventory survey found no historic properties
   ___ e) other:

2. This project has already gone through the historic preservation review process, and mitigation has been completed ___.

   ___ Thus, we believe that “no historic properties will be affected” by this undertaking

Staff: Cathleen A. Dagher
Date: 16 December 2003

Cathleen A. Dagher
Assistant Maui/Lana'i Island Archaeologist
(808) [redacted]
FROM: CHARLEY

DATE: 5 Dec 03

TO: BAUER, G.  SHORT: CHING, F.  INIT: DANBARA, S.  NAKAMA, L.
TO: FUJII, N.  INIT: GOODING, K.  NAKANO, D.  LAU, E.
TO: HARDY, R.  INIT: HIGA, D.  OHYE, M.  SAKODA, E.
TO: HIRANO, E.  INIT: ICE, C.  SUBIA, S.  SWANSON, S.
TO: IMATA, R.  INIT: JINAI, R.  UYENO, D.  YODA, K.

PLEASE:

1. Review & Comment
2. Type Draft
3. Approval
4. Signature

See Me

Take Action

Type Final

File

Xerox copies

WELL NUMBER 5615-07  WELL NAME Kealii-Naish

ATTACHMENTS FOR WELL CONSTRUCTION PERMIT:
1. COVER LETTER
2. PERMIT (2x)
3. COMMENTS: SDWB
4. WWB
5. CWB
6. HEER
7. LD
8. HP
9. PUMP TEST
10. WCR I FORM
11. WELL CHECK PRINTOUT

TO BE SENT TO APPLICANT

FOR OFFICE USE ONLY

ATTACHMENTS FOR PUMP INSTALLATION PERMIT:
1. COVER LETTER
2. PERMIT (2x)
3. COMMENTS: SDWB
4. WWB
5. CWB
6. HEER
7. LD
8. HP
9. WCR II FORM
10. WUR FORM
11. GLENN'S WORKSHEET

TO BE SENT TO APPLICANT

FOR OFFICE USE ONLY
December 11, 2003

Ref: 5615-07.wcp

Ms. Kathryn Naish
52 Kaapuni Drive
Kailua, HI 96734

Dear Ms. Naish:

Well Construction Permit
Kealii-Naish (Well No. 5615-07)

Enclosed are two (2) copies of your approved Well Construction Permit for the captioned well(s) that authorize well construction activities but excludes installation work for 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 completed application and information provided to and accepted by Commission staff as required in the Well Construction & Pump Installation Standards (1/23/97) and any special conditions performed under this permit. However, 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 that:

"Permanent pump installation for capacities between 0-70 gpm and where the property owner has demonstrated a need for a pump to meet the water needs of the non-ground-water management areas may be allowed prior to 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. If the pump installed prior to final pump installation permit issuance is subject to removal by the Commission, shows that a smaller pump is required to reduce the potential of affecting the local groundwater conditions 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 signed well construction permit.
Ms. Kathryn Naish  
Page 2  
December 11, 2003

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 shall not commence until a fully signed permit is 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 permit approval date.

If you have any questions, please call Charley Ice of the Commission staff at [redacted] or toll-free at [redacted] extension 70251.

Sincerely,

[Signature]

Peter T. Young  
Chairperson

Enclosures

c: Wailani Drilling, Inc.
WELL CONSTRUCTION PERMIT
Kealii-Naish, Well No. 5615-07

Note: This permit shall be prominently displayed at the site until the work is completed

In accordance with Department of Land and Natural Resources, Commission on Water Resource Management's Administrative Rules, Section 13-168, entitled "Water Use, Wells, and Stream Diversion Works", this document permits the construction and testing of Kealii-Naish (Well No. 5615-07) at Kealii Point, Makawao, Maui, TMK 2-8-4:46, 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 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 11/4-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 pump 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 in-stream 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 Hawai'i-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 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.

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 §13-168-12(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 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.

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

Date of Approval: December 5, 2003
Expiration Date: December 5, 2005

P. YOUNG, 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 driller 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: ____________________________

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

USGS
Department of Health's Safe Drinking Water, Wastewater, and Clean Water Branches
Maui Department of Water Supply
Wailani Drilling, Inc.
November 24, 2003

Mr. Peter T. Young, Chairperson
Commission on Water Resource Management
Department of Land and Natural Resources
P O Box 621
Honolulu, Hawaii 96809

SUBJECT: Permit Application - Kealii -
TMK: 2-8-004:046

Dear Mr. Young:

Thank you for the opportunity to comment on this application.

Zoning Compliance

The subject property is designated as agricultural zoned area. The proposed project qualifies as a related part of "Construction of a Single Family Residence that is not part of a larger development". The project will not have a cumulative impact, or a significant environmental or ecological effect on the Special Management Area within which the project is located. It is, therefore, exempt from the permit procedures of the Special Management Area Rules of the Maui Planning Commission. However, any conversion of the well to any use other than domestic use for a single family residence and their related livestock use will require a new SMA assessment.

Source and Consumption

The aquifer serving the project is the Haiku aquifer which has an estimated sustainable yield of 31 MGD. However in the 1990 Water Resources Protection Plan, Mink states that 15 MGD is a more conservative estimate. The 1990 Water Use and Development Plan notes use of this aquifer for municipal purposes. Therefore, we request that approvals not conflict with future county use and that maximized protection be afforded to the aquifer.

The applicant proposes to withdraw 30,000 gpd for domestic and irrigation use. Using system standard guidelines, anticipated use would be approximately 219,000 gpd.

System Infrastructure

The applicant should be required to provide adequate fire protection, water service, and domestic source in accordance to system standards and that a contingency or back up source be identified. In case of future subdivision the applicant should be made aware that systems with more than 25 people over 60 days of the year are considered public water systems and are subject to all the rules and regulations of the State Drinking Water Act. The potable use of the well should meet the requirements of the State of Hawaii Department of Health for potable water sources.
While the proposed well does not have immediate effect on existing DWS wells, there are private wells that are in the zone of influence which does point to potential conflict in use. This conflict depends on pumpage, drawdown and aquifer status. Attached is a map showing the location of private wells in the zone of influence. We suggest that the applicant be required to report monthly pumpage to DWS as well as the Commission on Water Resource Management (CWRM).

Groundwater Protection

In order to protect groundwater resources, we encourage the applicant to adopt Best Management Practices (BMPs) designed to minimize infiltration and runoff from daily activities. Sample BMPs are as enumerated below.

1) Inspect exposed parts of the well periodically for problems such as: cracked or corroded well casing, broken or missing well cap, damage to protective casing, settling and cracking of surface seals.
2) Slope the area around the well so that surface runoff drains away from the well.
3) Provide a well cap or sanitary seal to prevent unauthorized use of or entry into the well.
4) Provide for sediment removal or well cleaning as necessary.
5) Have the well tested once a year for fecal coliform or other constituents that may be of concern.
6) Keep accurate records of any well maintenance, such as disinfection or sediment removal, that might require use of chemicals in the well.
7) Avoid mixing or using pesticides, fertilizers, herbicides, degreasers, fuels, or other pollutants near the well.
8) Do not locate any type of potentially polluting activity up slope from the well.

Conservation

We encourage the applicant to consider the following water conservation measures in and around the property:

Utilize Low-Flow Fixtures and Devices: Maui County Code Subsection 16.20A.880 requires the use of low-flow water fixtures and devices in faucets, showerheads, urinals, water closets and hose bibs. Water conserving washing machines, ice makers, and other units are also available.

Maintain Fixtures to Prevent Leaks: A simple, regular program of repair and maintenance can prevent the loss of hundreds or even thousands of gallons a day. Refer to the attached handout, “The Costly Drip.”

Use Climate-adapted Plants: This project site is located in the “Maui County Planting Plan” - Plant Zones 1 & 5. Please refer to the attached documents “Saving Water in the Yard”. Native plants adapted to the area, conserve water and further protect the watershed from degradation due to invasive alien species.

Should you have any questions, please call our Water Resources and Planning Division at [insert number].

Sincerely,

George T. Tengan
Director

cc: Engineering Division
Applicant
STATE MESSENGER DELIVERY

Date: 11.25.2003

To: Commission on Water Resource Management
   Department of Land & Natural Resources
   State of Hawaii

From: Department of Health, Wastewater Branch, Planning & Design Section

Attn: [Signature] (Names not legible)

Subject: Well No. 561507 Kealii Muñoz

Well No. ________________________________________________________________

STATE MESSENGER DELIVERY
November 10, 2003

TO: Honorable Chiyome L. Fukino, M.D., Director
Department of Health
Attention: Harold Yee, Wastewater Branch
William Wong, Safe Drinking Water Branch
Dr. Keith Kawaoka, Hazardous Evaluation and Emergency Response
Alec Wong, Clean Water Branch

FROM: Peter T. Young, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application
Kealii-Naish Well (Well No. 5615-07)

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

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. Please respond by returning this cover memo form by November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

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

Cl: ss Attachment(s)

RESPONSE:

[ ] This well qualifies as a source which will serve as a source of potable water to a public water system (defined as serving 25 or more people at least 60 days per year or has 15 or more service connections) and must receive Director of Health approval prior to its use to comply with Hawaii Administrative Rules (HAR), Title 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 30 days per year or 15 service connections) and if the well water is used for drinking, the private owner should test for bacteriological and chemical presence before initiating such use and routinely monitor the water quality thereafter. However, if future planned use from this source increases to meet the public water system definition then Director of Health approval is required prior to implementation.

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

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

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

[ ] An NPDES permit is required.

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

No comments/objections.

Contact Person: Lei N. Kawaihae
Phone: 586-4294
Date: 11.26.2003
Signed: Chinyom Fukino
Facsimile Request and Cover Sheet
Wastewater Branch
919 Ala Moana Blvd. Room 309
Honolulu, Hawaii 96814-4920

Date: 11/24/03
Roland Tejano, Maui District Health Office
From: Lori Kajiwara, Planning/Design Section
Email: lkajiwara@eha.health.state.hi.us

Subject: Request for Information

Do you have any IWS files or records for the following site:
(2) 2004.07.04 Kealii Naish
Hau'ula Rd

Please check all that apply:
[ ] sewered  [ ] no record
[ ] cesspool  [ ] septic tank  [ ] aerobic unit
[ ] can be sewer  

File # if applicable: 5310
# of Bedrooms: 0
# of Bathrooms: 0

Record Date: 11/24/03
Submit Date: 11/24/03
Plan Approval Date: 11/24/03
Inspection Date: NOT APPLICABLE
System "Approval for Use" Date: 

Other: 

Please fax site/plot plan if available. Thank you.
TO: Honorable Chiyome L. Fukino, M.D., Director
Department of Health
Attention: Harold Yee, Wastewater Branch
William Wong, Safe Drinking Water Branch
Dr. Keith Kawaoka, Hazardous Evaluation and Emergency Response
Alec Wong, Clean Water Branch

FROM: Peter T. Young, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application
Keali-Naish Well (Well No. 5615-07)

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

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. Please respond by returning this cover memo form by November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

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

CLASS
Attachment(s)

RESPONSE:

Tn this well qualifies as a source which will serve as a source of potable water to a public water system (defined as serving 25 or more people at least 60 days per year or 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, §11-20.28.

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 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 prevention device, and by clearly labeling all non-potable systems 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 applicants information, a source of possible wastewater contamination is not located near the proposed well site (information attached).

An NPDES permit is required.

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

No comments/objections

Contact Person: Alec Wong
Phone: [redacted]
Signed: [redacted]
Date: 11/19/03
The Department of Health, Clean Water Branch has the following comments:

1. For Well-Drilling Activities

Any discharge to State waters of treated process wastewater effluent associated with well drilling activities is regulated by Hawaii Administrative Rules, Title 11, Chapter 55, Appendix I, effective September 22, 1997. Treated process wastewater effluent covered by this general permit includes well drilling slurries, lubricating fluids wastewaters, and well purge wastewaters. This general permit does not cover well pump testing. The applicable Notice of Intent Forms and filing fee shall be submitted at least thirty (30) days before the start of discharge to the Department of Health, Clean Water Branch at 919 Ala Moana Boulevard, Room 301, Honolulu, Hawaii 96814-4920 or P.O. Box 3378, Honolulu, Hawaii 96801-3378. Inquiries may be directed to the Clean Water Branch at [Redacted] or by fax at [Redacted].

2. For Well Pump Testing

The discharger shall take all measures necessary to prevent the discharge of pollutants from entering State waters. Such measures shall include, if necessary, containment of the initial discharge until the discharge is essentially free of pollutants. If the discharge is entering a stream or river bed, best management practices shall be implemented to prevent the discharge from disturbing the clarity of the receiving water. If the discharge is entering a storm drain, the discharger must obtain written permission from the owner of that storm drain prior to discharge. Furthermore, best management practices shall be implemented to prevent the discharge from collecting sediments and other pollutants prior to entering the storm drain.

JS/cr
November 10, 2003

TO: Honorable Chiyome L. Fukino, M.D., Director
Department of Health
Attention: Harold Yee, Wastewater Branch
William Wong, Safe Drinking Water Branch
Dr. Keith Kawaka, Hazardous Evaluation and Emergency Response
Alec Wong, Clean Water Branch

FROM: Peter T. Young, Chairperson
Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application
Kealii-Naish Well (Well No. 5615-02)

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

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. Please respond by returning this cover memo form by November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

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

CLASS
Attachment(s)

RESPONSE:

[ ] This well qualifies as a source which will serve as a source of potable water to a public water system (defined as serving 25 or more people at least 60 days per year or has 15 or more service connections) and must receive Director of Health approval prior to its use to comply with Hawaii Administrative Rules (HAR), Title 11, Chapters 20, 21, and 22, 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 therefrom. However, if future planned use from this source increases to meet the public water system definition then Director of Health approval is required prior to implementation.

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

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

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

[ ] An NPDES permit is required.

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

[ ] No comments/objections.

Contact Person: Bill Wong
Phone: 587-0251
Signed: Bill Wong
Date: NOV 24 2003
TO: Honorable Chiyome L. Fukino, M.D., Director
Department of Health
Attention: Harold Yee, Wastewater Branch
William Wong, Safe Drinking Water Branch
Dr. Keith Kawaoka, Hazardous Evaluation and Emergency Response
Alex Wong, Clean Water Branch

FROM: Peter T. Young, Chairperson
Commission on Water Resources Management

SUBJECT: Well Construction/Pump Installation Permit Application
Kealii-Naish Well (Well No. 5615-07)
Transmitted for your review and comment is a copy of the captioned Well Construction/Pump Installation permit application.

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. Please respond with this cover memo form by November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

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

Cl/ss
Attachment(s)

RESPONSE:

[1] This well qualifies as a source which will serve as a source of potable water to a public water system (defined as serving 25 or more people at least 60 days per year or has 15 or more service connections) and must receive Director of Health approved permit to be used to comply with Hawaii Administrative Rules (HAR), Title 11, Chapter 20, Rules Relating to Potable Water Systems, §11-20-26.

[1] 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.

[1] 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 supplies with warning signal to prevent inadvertent consumption of non-potable water. Backflow preventative devices should be routinely inspected and tested.

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

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

[1] An NPDES permit is required.

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

[1] No comments/objections. We defer to wastewater and drinking water concerns.

Contact Person: Dr. Keith Kawaoka Phone: 586-4249

Signed: [Signature]

Fax to: Commission on Water Resources Management: [Fax number]
TO: Dede Mamiya, Administrator  
Land Division  

FROM: Ernest Y.W. Lau, Deputy Director  
Commission on Water Resource Management  

SUBJECT: Well Construction/Pump Installation Permit Application  
Keali'i-Naish Well (Well No. 5515-07)  

November 10, 2003  

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

We would appreciate your comments on the captioned application with regard to the programs, plans, and objectives specific to your division. Please respond by returning this cover memo form by November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume you have no comments.  

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

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.  

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

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

No objections  

Original source of private title is Grant 3430:1 issued prior to Statehood.  

Contact Person: Gary Martin  
Phone:  

Signed: Gary Martin  
Date: NOV 18 2003
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Didn't know it was in an SRA. the application indicates the October for approval (copy submitted)
TO: Michael W. Foley, Director  
     Department of Planning  
     County of Maui

FROM: Peter T. Young, Chairperson
     Commission on Water Resource Management

SUBJECT: Permit Application
         Kealii-Naish Well (Well No. 5615-07)

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 November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

Please find the attached maps to locate the proposed well. If you have any questions about this permit application, request additional information, or request additional review time, please contact Charley Ice of the Commission staff at 11-18-03
Ms. Katy Naish
P. O. Box 11
Kailua, Hawaii  96734

Dear Ms. Naish:

Re:  Special Management Area (SMA) Exemption Permit -- For Well for a Single Family Dwelling and Livestock Use on Agricultural Land

TMK: (2)1-6-003 003 & 602 (SMX 2003/0364) (SM5 2003/0372)

The Maui Planning Department (Department) has reviewed the above-referenced assessment application including plans dated October 1, 2003, and finds that proposed project qualifies as a related part of “Construction of a Single Family Residence that is not part of a larger development.” Further, the potential environmental and ecological effects of the above-referenced project have been reviewed in accordance with the significance criteria set forth in Section 12-202-12(e) of the Special Management Area Rules for the Maui Planning Commission.

Based upon this review, the Department finds that the project will not have a cumulative impact, or a significant environmental or ecological effect on the Special Management Area within which the project site is located. As such, the project is not a “development” and is, therefore, exempt from the permit procedures of the Special Management Area Rules for the Maui Planning Commission. Further, please be advised that any conversion of the well to any other use other than domestic use for one single family residence and their related livestock use will require a new SMA Assessment Application.

Thank you for your cooperation. If additional clarification is required, please contact Ms. Maria N. Isotov, Staff Planner, of this office at [redacted]

Sincerely,

MICHAEL W. FOLEY
Planning Director

250 SOUTH HIGH STREET, WAILUKU, MAUI, HAWAII 96793
PLANNING DIVISION          ZONING DIVISION          FACSMILE
Ms. Kathryn Naish
52 Kaapuni Dr.
Kailua, HI 96734

Dear Ms. Naish:

Well Construction/Pump Installation Permit Application for Well No. 5615-07

We acknowledge receipt, on October 27, 2003, of your completed Well Construction/Pump Installation permit application and filing fee for the Kealii-Naish Well (Well No. 5615-07). 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 [redacted]

Sincerely,

[Signature]

ERNEST Y.W. LAU
Deputy Director

Cl:ss

c: Wailani Drilling, Inc.
TO: Honorable Chiyome L. Fukino, M.D., Director  
Department of Health  
Attention: Harold Yee, Wastewater Branch  
William Wong, Safe Drinking Water Branch  
Dr. Keith Kawaoka, Hazardous Evaluation and Emergency Response  
Alec Wong, Clean Water Branch

FROM: Peter T. Young, Chairperson  
Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application  
Kealii-Naish Well (Well No. 5615-07)

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

We would appreciate your comments on the captioned application for any conflicts or inconsistencies with the programs, plans, and objectives specific to your department. Please respond by returning this cover memo form by November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

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

Cl: ss
Attachment(s)

RESPONSE:

[ ] This well qualifies as a source which will serve as a source of potable water to a public water system (defined as serving 25 or more people at least 60 days per year or has 15 or more service connections) and must receive Director of Health approval prior to its use to comply with Hawaii Administrative Rules (HAR), Title 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 [ ] is not located near the proposed well site (information attached).

[ ] An NPDES permit is required.

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

[ ] No comments/objections

Contact Person: __________________________ Phone: __________________________
Signed: __________________________ Date: __________________________
November 10, 2003

TO: Dede Mamiya, Administrator  
Land Division

FROM: Ernest Y.W. Lau, Deputy Director  
Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application  
Kealii-Naish Well (Well No. 5615-07)

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

We would appreciate your comments on the captioned application with regard to the programs, plans, and objectives specific to your division. Please respond by returning this cover memo form by November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume you have no comments.

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

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. ________________________.

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

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

[ ] No objections

[ ] Other comments:

Contact Person: ____________________________ Phone: ______________

Signed: ____________________________ Date: ____________________________
TO: Holly McEldowney, Acting Administrator
   Historic Preservation

FROM: Ernest Y.W. Lau, Deputy Director
      Commission on Water Resource Management

SUBJECT: Well Construction/Pump Installation Permit Application
         Kealii-Naish Well (Well No. 5615-07)

November 10, 2003

Transmitted for your review and comment is a copy of the captioned Well
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cover memo form by November 24, 2003. If we do not receive comments or a request for
additional review time by this date, we will assume you have no comments.

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

Clss
Attachment(s)

RESPONSE:

[ ] There may be areas in the vicinity of the well site that contain subsurface cultural remains such as artifacts,
   burials or concentrations of shells or charcoal.

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

[ ] No objections

[ ] Other comments:

Contact Person: ___________________________ Phone: ______________________

Signed: ___________________________ Date: ______________________
November 10, 2003

TO: George Tengan, Director
    Department of Water Supply
    County of Maui

FROM: Peter T. Young, Chairperson
      Commission on Water Resource Management

SUBJECT: Permit Application
         Kealii-Naish Well (Well No. 5615-07)

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 November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

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

Cl: ss
Attachment(s)

RESPONSE:

[ ]

Contact Person: __________________________ Phone: __________________________

Signed: __________________________ Date: __________________________
November 10, 2003

TO: Michael W. Foley, Director
    Department of Planning
    County of Maui

FROM: Peter T. Young, Chairperson
      Commission on Water Resource Management

SUBJECT: Permit Application
          Kealii-Naish Well (Well No. 5615-07)

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 November 24, 2003. If we do not receive comments or a request for additional review time by this date, we will assume that you have no comments.

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

Contact Person: ________________________ Phone: ________________________

Signed: ___________________________ Date: ___________________________
FROM: CHARLEY
DATE: 30-Oct-03
TO:
INIT.
TO:
INIT.
FOR:
PLEASE:

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

3 Approval
3 Signature
4 Information
See Me
1 Review & Comment

Take Action
5 Type Draft acknow letter
2 Type Final, label new file folder
5 File
Xerox copies

WELL NUMBER 5C: 07
WELL NAME Kealii Naish

ATTACHMENTS FOR APPLICATION PROCESSING - Both applicant & staff generated

1 TRANS. LETTER
2 CWRM MAP
3 APPL. FORM (3X)
4 USGS MAPS (3X)
5 TAX MAPS (3X)
6 PARCEL OWNER VERIF.
7 CONTRACTOR VERIF.
8 ALL INFO FILLED IN
9 BACKGROUND CHECK

FOLDER:

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

INCOMPLETE ACTION DATES

DATE
ACTION

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**TOTAL** $ 50.00

**REMARKS:**

LINE (1) Kealii-Naish Well, TMK 2-8-04:46
LINE (2) Wailea Ike Well, tmk: 2-1-08:42
LINE (3) 
LINE (4) 
LINE (5) 
LINE (6) 
LINE (7) 
LINE (8) 
LINE (9) 
LINE (10)
Charley,

Enclosed are the following items:

- Permit application for Katie Naish (5 copies)
- USGS and TMK map
- Approved SMA
- $25.00 check

Please confirm receipt by checking off the enclosed items and faxing a copy of this memo to me at 808/...

Thank you.

Sincerely, Michael Robertson
Ms. Katy Naish  
P. O. Box 11  
Kailua, Hawaii 96734

Dear Ms. Naish:

Re: Special Management Area (SMA) Exemption Permit -- For Well for a Single Family Dwelling and Livestock Use on Agricultural Land

TMK: (2)1-6-009:003 & 002 (SMX 2003/0364) (SM5 2003/0372)

The Maui Planning Department (Department) has reviewed the above-referenced assessment application including plans dated October 1, 2003, and finds that proposed project qualifies as a related part of "Construction of a Single Family Residence that is not part of a larger development." Further, the potential environmental and ecological effects of the above-referenced project have been reviewed in accordance with the significance criteria set forth in Section 12-202-12(e) of the Special Management Area Rules for the Maui Planning Commission.

Based upon this review, the Department finds that the project will not have a cumulative impact, or a significant environmental or ecological effect on the Special Management Area within which the project site is located. As such, the project is not a "development" and is, therefore, exempt from the permit procedures of the Special Management Area Rules for the Maui Planning Commission. Further, please be advised that any conversion of the well to any other use other than domestic use for one single family residence and their related livestock use will require a new SMA Assessment Application.

Thank you for your cooperation. If additional clarification is required, please contact Ms. Maria N. Isotov, Staff Planner, of this office at [redacted].

Sincerely,

MICHAEL W. FOLEY  
Planning Director

COUNTY OF MAUI  
DEPARTMENT OF PLANNING

October 14, 2003

Ms. Katy Naish
P. O. Box 11
Kailua, Hawaii 96734

Re: Special Management Area (SMA) Exemption Permit -- For Well for a Single Family Dwelling and Livestock Use on Agricultural Land

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Thank you for your cooperation. If additional clarification is required, please contact Ms. Maria N. Isotov, Staff Planner, of this office at [redacted].

Sincerely,

MICHAEL W. FOLEY  
Planning Director
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P. O. Box 11  
Kailua, Hawaii 96734  

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Planning Director
Ms. Katy Naish
P. O. Box 11
Kailua, Hawaii 96734

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Thank you for your cooperation. If additional clarification is required, please contact Ms. Maria N. Isotov, Staff Planner, of this office at [Contact Information]

Sincerely,

MICHAEL W. FOLEY
Planning Director

250 SOUTH HIGH STREET, WAILUKU, MAUI, HAWAII 96793
Ms. Katy Naish
October 14, 2003
Page 2

MWF:MNI:lar
c: Clayton I. Yoshida, AICP, Planning Program Administrator
   Aaron H. Shinmoto, PE, Planning Program Administrator (2)
   Maria N. Isotov, Staff Planner
   John Nakagawa, Office of Planning, CZM Program
   DSA (2)
   DWS
   DOH - Honolulu
   DLNR, Commission on Water Resource Management
   03/SM5 File
   03/CZM File
   General File
   TMK File
K:\WP_DOCS\PLANNING\SM5\2003\0372_NaishWell\approval.wpd
**APPLICATION FOR PERMIT**

**Well Construction and/or** Pump Installation

**Instructions:** Please print in ink or type and send completed application with attachments to the Commission on Water Resource Management, P.O. Box 201, Honolulu, Hawaii 96808. Application must be accompanied by 5 copies and a non-refundable filing fee of $25.00 payable to the Dept. of Land and Natural Resources. The Commission may not accept incomplete applications. For assistance, call the Regulation Branch at 808-682-6100. For further information and updates to this application form, visit http://www.state.hi.us/cwrm.

**APPLICANT INFORMATION:** (Fill in all three, if applicable, and place a check next to the primary contact)

1. (a) **WELL OWNER:** Kathryn Naish  
   Mailing Address: 52K Kaapuni Dr. Kailua HI 96734  
   Phone: 2682268  
   Fax: 8082624988  
   Email: Knaisha@hotmail.com

2. (b) **LAND OWNER:** Same  
   Mailing Address:  
   Phone:  
   Fax:  
   Email:  

3. (c) **CONTRACTOR:** Michael Roberts  
   Mailing Address: 655 Kuaale Rd. Haiku HI 96708  
   Phone: 5729205  
   Fax:  
   Email: WiliamEschle Lenovo 2015

**WELL & PUMP INFORMATION:** (Please fill in the diagram on the back of this form.)

2. WELL NAME: Kailua-Naish  
   Island:  
   Address: Haumana Rd.  
   Tax Map Key: 
   
   *Note:部分 of 7.5-Minute Series USGS topographic map (scale 1:24,000) with well location labeled and include the name of the quad map (b) a property tax map, showing well location referenced to established property boundaries

3. **PROPOSED WORK:**  
   (check all that apply)  
   - Construct New Well  
   - Install New Pump*  
   - Modify Existing Well*  
   - Modify Pump*  
   - Abandon/Seal*  
   - State Well No.: (if unknown, please call Commission at 808-682-6225)

4. **CONSTRUCTION:**  
   - Dug  
   - Shaft  
   - Tunnel

5. **PROPOSED PUMPING RATE:**  
   - 600 gallons per minute

6. **PROPOSED USE:**  
   (check all that apply)  
   - Municipal (including hotels, stores, etc.)  
   - Industrial  
   - Domestic (individual, noncommercial water system)  
   - Military  
   - Other (explain):  
   - No. of Acres: 73  
   - Land Use:  
   - Open-pipe  
   - Irrigation (crop)  
   - Water  
   - Other:  
   - Office  
   - Other (explain):  

7. **PROPOSED AMOUNT OF WITHDRAWAL:**  
   - 30,000 gallons per day

8. **LEGAL REQUIREMENTS:** If required, these permits must be obtained
   - Conservation District Use Permit (CDUP) To find out if a CDUP is necessary,  
   - Environmental Impact Statement (EIS) or Environmental Assessment (EA)  
   - Special Management Area Permit (SMAP) To determine if an SMAP is necessary, county, call 270-2235; on Kauai, call 961-6226 for Oahu

9. **REMARKS, EXPLANATIONS:**

**OTHER IMPORTANT INFORMATION:**

**NOTE:** Signing below indicates the signatories understand and swear that the information provided on this application is accurate and true to the best of their knowledge. Further, the signatories 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 60 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; 5) in the event that the application is not completed correctly, any permit may be suspended until the item is brought in to compliance, and any work done while the permit is in suspension may result in fines of up to $1000/day.

**Well Owner**  
Kathryn Naish  
Landowner  
Contractor  
Michael Roberts  
Signature  
Signature  
Signature  
Date  10/22/103  
Date  10/22/103  
Date  10/22/103

**FOR OFFICIAL USE ONLY:** Aquifer System No.  
State Well No.  

WCPRA Form (2000)
10. PROPOSED WELL SECTION (Please attach schematic if different from diagram provided below)

For non-salt water Basal Wells - bottom elevation of well should not be deeper than 1/4 of aquifer thickness or, Bottom Elevation of Well Limit = (Water Elevation - (1/4) Aquifer Thickness) / 4

Example: Estimated + 2 ft Water Level Elev. = Bottom Elevation of Well Limit = (2 ft - 0.5 ft) / 4 = 0.42 ft.

Solid Casing Material:
- Carbon Steel: compliant with (check one or more): ANSI/AWWA C200 □ API Spec. 5L □ ASTM A53 □ ASTM A139
- Stainless Steel: compliant with (check one or more): ASTM A400 (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 F490 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 Motor 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 Material:
- Carbon Steel: compliant with (check one or more): ANSI/AWWA C200 □ API Spec. 5L □ ASTM A53 □ ASTM A139
- Stainless Steel: compliant with (check one or more): ASTM A400 (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 F490 and (ASTM D1785 or ASTM D2241): (check one): □ Schedule 40 □ Schedule 80 □ Schedule 120
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  - Filament Wound Resin Pipe conforming to ASTM D2996
  - Centrifugally Cast Resin Pipe conforming to ASTM D2997
  - Reinforced Plastic Motor 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
October 13, 2003

Mr. Michael Foley, Planning Director
Department of Planning - Maui
250 south High Street
Wailuku, Hawaii 96793

Dear Mr. Foley,

SUBJECT: Chapter 6E-42 Historic Preservation Review – Special Management Area Assessment Application for an Exempted Action or a SMA Minor Permit for the Proposed Naish Well (Subject I.D.: SMX 20030364) [County/Planning] Keali‘i Iki Ahupua‘a, Makawao District, Island of Maui
TMK: (2) 2-8-004:046

Thank you for the opportunity to review and comment on the Special Management Area Assessment Application for an Exempted Action or a SMA Minor Permit for the Proposed Naish Well, which was received by our staff September 12, 2003.

We have previously provided comments for a Special Management Area Assessment Application for the subject property (SHPD DOC NO.: 0308CD20[LOG NO.: 2003.1544]). At that time we recommended that no action be taken on the subject building permit application until an archaeological inventory survey had been conducted of the subject property.

Scientific Consultant Services has recently completed the recommended inventory survey. The report documenting the findings of the survey (Archaeological Inventory Survey of an Approximately 73 Acres of Land Located in Keali‘i Iki Ahupua‘a, Makawao, Maui TMK: 2-8-004:046. O’Rourke 2003) has just been sent to this office for review. Therefore, we are unable to provide comments at this time. Upon the completion of the inventory survey review, we will be better able to provide comments pertaining to the proposed undertaking.

If you have any questions, please call Cathleen A. Dagher at [redacted]

Aloha,

P. Holly McEldowney, Acting Administrator
State Historic Preservation Division

CD:jen
c: Cultural Resources Commission, Planning Dept, County of Maui, 250 S. High Street, Wailuku, HI 96793
Ernest Lau, Deputy Director, Commission on Water Resource Management, DLNR [ATTN: Charlie Ice]