STATE OF HAWAII
COMMISSION ON WATER RESOURCE MANAGEMENT
DEPARTMENT OF LAND AND NATURAL RESOURCES
DIVISION OF WATER RESOURCE MANAGEMENT

REGISTRATION OF WELL
AND
DECLARATION OF WATER USE

INSTRUCTIONS: Please type or print. If information is not available or not applicable, indicate as N/A. Fill out as completely as possible, sign, and file form with the Division of Water Resource Management, P.O. Box 373, Honolulu, Hawaii 96809. Phone 548-3648 or 548-7543 for assistance.

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

STATE WELL NO.: 3911-01
WELL NAME OR DESIGNATION: Kawaihapa
SOURCE OR STATION NAME (For a battery of wells):

A. WELL OPERATOR
Firm name: US ARMY SUPPLY COM
Contact person: ______________________
Address: P.O. BOX 8750
Honolulu, HI 96812
Zip: 96812 Phone: ___________ 

B. OWNER OF WELL SITE
Firm name: ______________________
Contact person: ______________________
Address: ______________________
Zip: ___________ Phone: ___________

C. WELL LOCATION
Tax Map Key: ______________________
Town, Place, District: _______________
Attach USGS "Quad" map (scale 1:24,000), tax map, or other map showing the well location.

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

Ground elevation (Mean sea level): ________ ft.
Reference point (Used to measure depth to water):
Elevation: ______________________ ft.
Description: ______________________

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

E. INSTALLED PUMP DATA
Pump type: □ Vertical shaft □ Submersible □ Centrifugal □ Other (specify):
Power: □ Diesel, ___ HP □ Gas, ___ HP □ Electric, ___ HP □ Other (specify):
Pump capacity: _______ gallons per minute
Pump installation contractor: ______________________

... (continued over)

For Official Use Only:
Date received: 1-26-89 Date accepted: ________
Field checked by: ________ Date: ________
Latitude: 21° 34'.37" Hydrologic Unit: ___________
Longitude: 158° 11'.47" State Well No.: 3911-01

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

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

Water use data are recorded: ☐ Daily ☐ Weekly ☐ Monthly ☐ Other (Describe): ____________________________
Method of measurement: ☐ Flow Meter ☐ Orifice ☐ Other (Describe): ____________________________

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

WATER USE, IN GALLONS x 1000

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Minimum day’s use: ____________________________ gallons  Maximum day’s use: ____________________________ gallons

Typical times of usage:

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

<table>
<thead>
<tr>
<th>Category</th>
<th>Additional Information</th>
<th>Number of service connections: ____________________________</th>
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<tbody>
<tr>
<td>☐ Municipal (including resorts, hotels, businesses)</td>
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<td>☐ Domestic (systems serving 25 people or less)</td>
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<td>☐ Irrigation</td>
<td>Number of service connections: ____________________________</td>
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<td>☐ Industrial</td>
<td>Acres Irrigated:</td>
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<td>☐ Other</td>
<td>Crop(s):</td>
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<td>☐ Cooling</td>
<td>Sugar</td>
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<td>☐ Manufacturing</td>
<td>Other (specify):</td>
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<td>☐ Other</td>
<td>Pineapple</td>
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<td>☐ Other (specify):</td>
<td>Non-Crop:</td>
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<td>☐ Other (specify):</td>
<td>Landscape</td>
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<td>☐ Other (specify):</td>
<td>Golf Course</td>
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<td>☐ Other (specify):</td>
<td>Method:</td>
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<td>☐ Other (specify):</td>
<td>Drip</td>
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<td>☐ Other (specify):</td>
<td>Furrow</td>
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<td>☐ Other (specify):</td>
<td>Sprinkler</td>
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<td>☐ Other (specify):</td>
<td>Cooling</td>
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<td>☐ Other (specify):</td>
<td>Manufacturing</td>
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<td>☐ Military</td>
<td>Mill</td>
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<td>☐ Other</td>
<td>Specify (livestock, aquaculture, etc.): ____________________</td>
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</table>

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

Water User’s Signature: ____________________________  Date: ____________________________
Printed Name: ____________________________
Firm or Title (Well Operator etc.): ____________________________
STATE OF HAWAII
COMMISSION ON WATER RESOURCE MANAGEMENT
DEPARTMENT OF LAND AND NATURAL RESOURCES
DIVISION OF WATER RESOURCE MANAGEMENT

REGISTRATION OF WELL
AND DECLARATION OF WATER USE

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

STATE WELL NO.: 3411-05
WELL NAME OR DESIGNATION: Kawahapa
ISLAND: CNUH
SOURCE OR STATION NAME (For a battery of wells):

A. WELL OPERATOR

Firm name: US Army Support Command
Contact person:
Address: APO E. SHIPPIER
              HONOLULU HI
Zip: 96854 Phone:

B. OWNER OF WELL SITE

Firm name:
Contact person:
Address:
Zip: Phone:

C. WELL LOCATION

Tax Map Key: Town, Place, District:
Attach USGS "Quad" map (scale 1:24,000), tax map, or other map showing the well location.

D. WELL DATA

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

Ground elevation (mean sea level): ______ ft.
Reference point (used to measure depth to water):
Elevation: ______ ft.
Description: ____________________________

Depth to water (Below reference point): ______ ft.

Maximum recorded chloride: ______ ppm
Minimum recorded chloride: ______ ppm
Maximum chloride in 1987: ______ ppm

Year drilled or constructed: ______
Well contractor: _________________________
Casing diameter: ______ in.
Solid casing depth (Below ground): ______ ft.
Perforated casing depth (Below ground): ______ ft.
Total depth of well: ______ ft.

Reference point (Used to measure depth to water):
Elevation: ______ ft.
Description: ____________________________

Maximum recorded chloride: ______ ppm
Minimum recorded chloride: ______ ppm
Maximum chloride in 1987: ______ ppm

E. INSTALLED PUMP DATA

Pump type: [ ] Vertical shaft [ ] Submersible [ ] Centrifugal [ ] Other (specify):
Power: [ ] Diesel, ______ HP [ ] Gas, ______ HP [ ] Electric, ______ HP [ ] Other (specify):
Pump capacity: ______ gallons per minute
Pump installation contractor: ____________________________

For Official Use Only:
Date received: ______ Date accepted: ______
Field checked by: ______ Date: ______ Latitude: ______ Hydrologic Unit: ______
Comments: ______ Longitude: ______ State Well No.: ______

References: Hawaii Revised Statutes, Chapter 174C.
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□ Other (describe): ____________________________

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

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Minimum day’s use: __________ gallons Maximum day’s use: __________ gallons

Typical times of usage: __________________________

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

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

Additional Information

Number of service connections: __________________________

Acres Irrigated: __________________________

Crop(s): □ Sugar □ Pineapple □ Other (specify):
□ Landscape □ Golf Course □ Other (specify):

Non-Crop: □

Method: □ Drip □ Furrow □ Sprinkler

Cooling □ Manufacturing □ Mill □ Other (specify):

Specify (livestock, aquaculture, etc.): __________________________

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

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