



STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES
COMMISSION ON WATER RESOURCE MANAGEMENT
APPLICATION FOR A WELL CONSTRUCTION /
PUMP INSTALLATION PERMIT

For Official Use Only:

Instructions: Please print in ink or type and send completed application with attachments to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. Application must be accompanied by 10 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 **587-0225**. For further information and updates to this application form, visit <http://www.hawaii.gov/dlnr/cwrm>.

WELL LOCATION INFORMATION

| | | | |
|---|---------------------|-----------------------------|--|
| 1. STATE WELL NO. (if assigned) | 2. WELL NAME | 3. ISLAND | 4. TMK () island zone sec plat parcel lot |
| 5. WELL COORDINATES (latitude and longitude, referenced to NAD 83, degrees, minutes, seconds to 1 decimal place) | | | |
| The following must be attached before this application is accepted as complete: • Property tax map, showing well location referenced to established property boundaries • Photograph of the proposed well site • A schematic diagram showing the well site, access road and proposed well infrastructure | | | |
| 6. WELL OPERATOR'S NAME/COMPANY | | Well Operator's Contact | 7. LANDOWNER'S NAME/COMPANY |
| Well Operator's Mailing Address | | Landowner's Mailing Address | |
| Well Operator's Phone | Well Operator's Fax | Well Operator's E-mail | Landowner's Phone |
| | | | Landowner's Fax |
| | | | Landowner's E-mail |

PROPOSED WELL CONSTRUCTION

| | |
|--|---|
| 8. Proposed Work <input type="checkbox"/> Construct New Well <input type="checkbox"/> Modify Existing Well <input type="checkbox"/> Abandon/Seal Well | 9. Construction Type <input type="checkbox"/> Drilled <input type="checkbox"/> Dug <input type="checkbox"/> Shaft <input type="checkbox"/> Tunnel |
| 10. Is this well part of a battery of wells? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

PROPOSED PUMP INSTALLATION

| | |
|--|--|
| 11. Proposed Work <input type="checkbox"/> Install New Pump <input type="checkbox"/> Replace Pump | 13. Proposed Pump Capacity, gpm (gallons per minute) |
| 12. Method of flow measurement <input type="checkbox"/> Flowmeter <input type="checkbox"/> Other (explain) | 14. Proposed Amount of Withdrawal, gpd (gallons per day) |

15. Proposed Surveyor name and license number (a surveyor is required for all Well Construction Permits and may be required for some Pump Installation Permits)

PROPOSED USE

16. Municipal (water systems serving greater than 25 individuals or 15 service connections)

17. Domestic Number of units to be served: _____

18. Industrial (describe)

19. Irrigation (describe crop and no. of acres)

20. Military (describe)

21. Other (describe)

OTHER LEGAL REQUIREMENTS *If required, items 22. and 23. must be obtained before the Commission can legally issue a permit:*

| | |
|---|---|
| 22. Conservation District Use Permit (CDUP) <input type="checkbox"/> Well is in Conservation District <input type="checkbox"/> Required, CDUP # _____ date approved _____ <input type="checkbox"/> Not Required (attach documentation from OCCL) <input type="checkbox"/> I have not checked with OCCL about whether or not a CDUP is required. <input type="checkbox"/> Well is not in Conservation District <input type="checkbox"/> I have not checked if well is in or out of Conservation District. | 23. Special Management Area Permit (SMAP) <input type="checkbox"/> Required, SMA # _____ date approved _____ <input type="checkbox"/> Not Required (attach documentation from applicable County agency) <input type="checkbox"/> I have not checked with the county about whether or not an SMA Permit is required. |
|---|---|

24. **State Historic Preservation Division (SHPD) of the Department of Land and Natural Resources**
 I have consulted with the SHPD regarding potential impacts of well construction activities on historic sites. I have attached applicable documentation from the HPD.
 I have not consulted with the SHPD regarding potential impacts of well construction activities on historic sites.

25. **Chapter 343**
 An Environmental Assessment was completed, and
 An Environmental Impact Statement was required and has been accepted (attach letter of acceptance). Publication date in The Environmental Notice: _____
 A Finding of No Significant Impact has been determined (attach letter). Publication date in The Environmental Notice: _____
 This project proposes:
 Use of state or county lands, or use of state or county funds
 Use within a state conservation district
 Use within a shoreline setback area
 Use within a national or Hawaii registered historic site
 Use within the Waikiki Special District
 The construction, expansion or modification of helicopter facility
 A wastewater treatment unit
 Waste-to-energy facility
 Landfill
 Oil refinery
 Power-generating facility
 None of the above 11 items

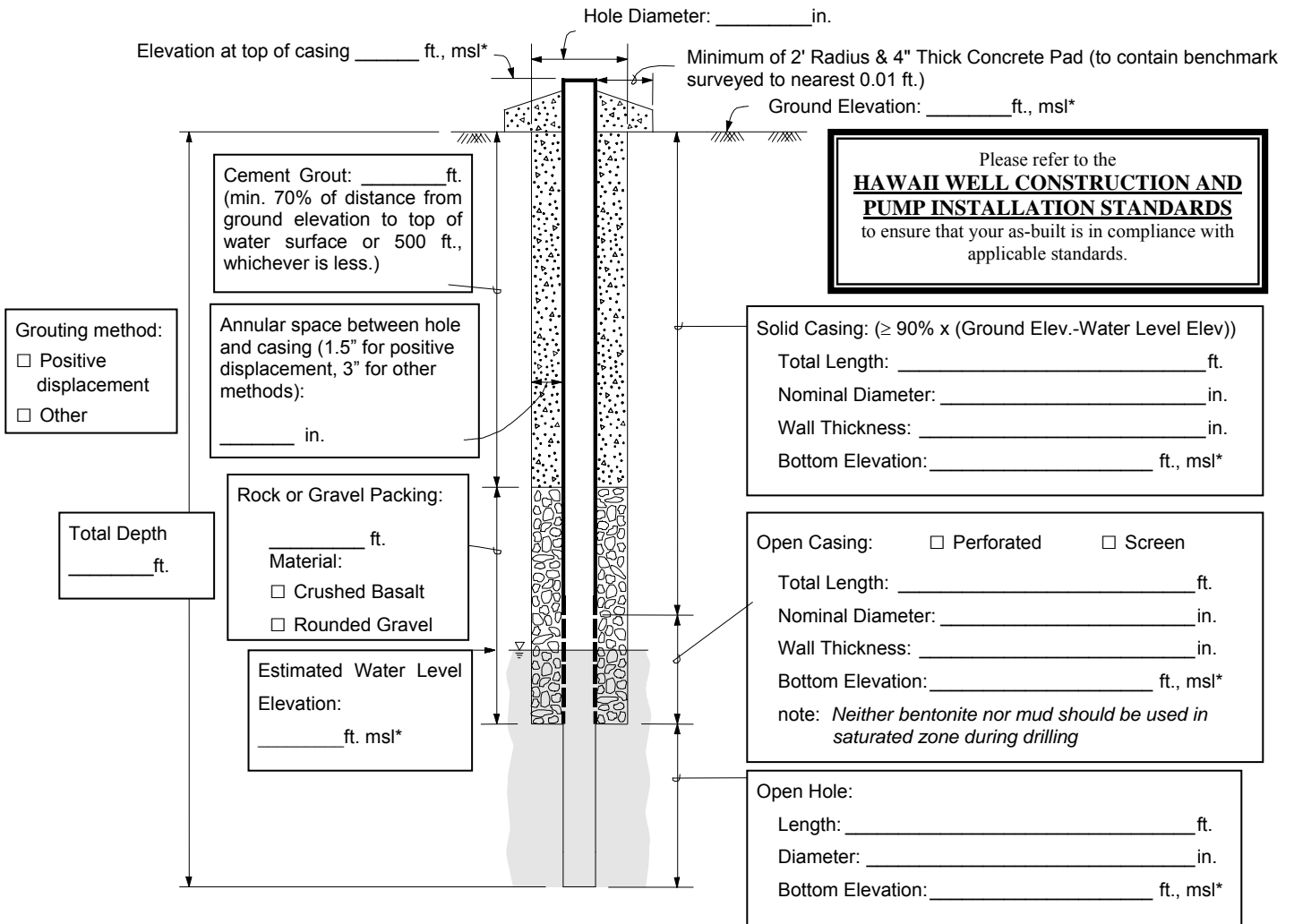
26. Water Use Permit No. (if applicable): _____

Additional remarks, explanations, etc. (attach additional sheet if more space is needed)

NOTE: Signing below indicates that the signatories understand and swear that the information provided is accurate and true to the best of their knowledge. Further, the signatories understand that upon permit approval: 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) 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 \$5000/day.

| | |
|---|---|
| 27. WELL DRILLER (Must be filled out if application is for Well Construction) _____ Licensee business name C-57 License No. _____ Signature Print Date _____ Address _____ Phone Fax E-mail | 28. PUMP INSTALLER (Must be filled out if application is for Pump Installation) _____ Licensee business name C-57/C-57a/A License No. _____ Signature Print Date _____ Address _____ Phone Fax E-mail |
|---|---|

PROPOSED WELL SECTION (Please attach schematic if different from diagram provided below. Also, if this proposed well is a dug well, attach a grading plan with cross section profiles showing existing and finished grades)



* The approximate elevation must be referenced to mean sea level (msl) at the time of application filing. Final elevations of well components shall be submitted in the Well Completion/Well Abandonment reports and referenced to a benchmark which has been established by a surveyor licensed by the State.

For non-salt water Basal Wells - bottom elevation of well should not be deeper than 1/4 of aquifer thickness or,

$$\text{Bottom Elevation of Well Limit} = \left(\text{Water Elevation} - \frac{41 \times \text{Water Level Elevation}}{4} \right)$$

Example: Estimated + 2 ft. Water Level Elev. → Bottom Elevation of Well Limit = $\left(2 - \frac{41 \times (2)}{4} \right) = -18.5 \text{ ft.}$

Note: Unless a variance is requested and approved, if the well is greater than 1/4 of the theoretical aquifer thickness, the well may have to be backfilled to bring the depth into compliance.

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 (or A606) 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 (or A606) 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

INSTRUCTIONS FOR FILLING OUT WELL CONSTRUCTION/PUMP INSTALLATION PERMIT APPLICATION FORM

CHECKLIST FOR A COMPLETE APPLICATION

- Fill in the most recent application form.
(check www.hawaii.gov/dlnr/cwrm or call 587-0225 for updates)
- Fill every line in (both sides of application).
- Enclose a check for \$25 payable to the Department of Land and Natural Resources.
- Mark the proposed well location on: the TMK map, the photo and the schematic, and attach to the application.
- For dug wells, attach a grading plan and cross section profiles showing existing and finish grades.
- Attach the original and 10 copies of the application form, maps, photo and schematic.
- Attach letters from OCCL and appropriate county agencies regarding items 21 to 23.
- Sign the application form.

Send the application and maps, copies, and the filing fee to:

Commission on Water Resource Management
P.O. Box 621
Honolulu, HI 96809

DESCRIPTIONS FOR LINES ON APPLICATION

WELL LOCATION INFORMATION

1. **STATE WELL NO.** If you already have a state well number assigned, please fill it out here. Otherwise, leave it blank and a well number will be assigned by the CWRM.
2. **WELL NAME** Give the well a short concise name that will differentiate it from other wells. It is what you want to call the well.
3. **ISLAND** The island name where the well is located.
4. **TMK** Tax Map Key number (generally there is no lot number, but where a parcel is divided into two lots, fill in the lot number)
5. **WELL COORDINATES** Fill in well coordinates taken from a GPS unit at the well site. Units are Degrees, Minutes and Seconds (seconds should be filled out to one decimal place). For example, 19°59'32.8"N, 155°14'51.5"W
6. **Well operator's information** Fill in the information for the well operator. This should be the entity that will be responsible for reporting the pumpage when the construction is completed.
7. **Landowner's information** Fill in the information for the landowner of the property where the well is located.

PROPOSED WELL CONSTRUCTION

8. **Proposed work** The proposed work can be the construction of a new well, the modification (deepening, etc.) of an existing well, or the abandonment and sealing of an existing well. Check one box only.
9. **Construction type** The construction type can be drilled, dug, shaft, or tunnel.
10. **Battery** Is this well part of a battery of wells? A battery is defined as two or more wells in close proximity that for all intents and purposes functions as a single source.

PROPOSED PUMP INSTALLATION

11. **Proposed work** The proposed work can be either the installation of a new pump or the replacement of an existing pump. Replacement of an existing pump requires a permit only if the pump is of greater capacity than the existing installed pump. Otherwise, a replacement will only require the submission of a Well Completion Report Part II.
12. **Method of flow measurement** This is the proposed method the operator will be using to measure pumpage for reporting purposes.
13. **Proposed pump capacity** The proposed pump capacity rate of the pump in gallons per minute (gpm).
14. **Proposed amount of withdrawal** The proposed amount of withdrawal in gallons per day (gpd), not to exceed (the proposed pumping capacity in gallons per minute) x 1440 minutes/day.

PROPOSED SURVEYOR

15. **Proposed surveyor name and license number** A Hawaii licensed surveyor must establish benchmark elevations for wells where proposed pumps of 70 gpm or more are to be installed, to comply with the well completion report requirements. Proposed pumps less than 70 gpm may have this requirement deferred until the Commission deems it is necessary. If you wish to defer this requirement and your pump is less than 70 gpm, please write "deferred" in this space.

PROPOSED USE

16. **Municipal Use** is domestic, industrial, and commercial use of water through public services available to persons of a county for the promotion and protection of their health, comfort, and safety, for the protection of property from fire, and for the purposes listed under the term "domestic use".
17. **Domestic Use** is any use of water for individual personal needs and for household purposes such as drinking, bathing, heating, cooking, noncommercial gardening, and sanitation.
18. **Industrial Use** is for uses such as cooling or processing water, etc.
19. **Irrigation Use** is for golf courses, agriculture, etc. Describe crop type and acreage.
20. **Military Use** is water used by the military from military operated water supply systems.
21. **Other** Use not described in items 15 through 19. Please add a description.

OTHER LEGAL REQUIREMENTS

22. **Conservation District Use Permit (CDUP)** To find out if your well is located in a Conservation District (CD), you should first check with the Land Use Commission (LUC) (<http://www.hawaii.gov/dbedt/gis/maps/slud.jpg> or call 587-2833). If the well is not in a CD, then you may check not in a CD box. If the well site is in a CD you will need to then determine if a Conservation District Use Permit (CDUP) is required. To find out if a CDUP is necessary, please contact the Office of Conservation and Coastal Lands (OCCL) of DLNR at 587-0377.
23. **Special Management Area Permit (SMAP)** To determine if an SMAP is necessary, on Oahu call 527-5374; on Hawaii call 961-8288; for Maui County call 270-7235; on Kauai call 241-6677
24. **Historic Preservation review** If the parcel(s) affected by construction (well location/access road/infrastructure for well) has been reviewed by the State Department of Land and Natural Resources Historic Preservation Division (SHPD or through an OEQC Environmental Review, Special Management Area Permit, etc.), check "yes" and attach any relevant documentation from SHPD. If the affected parcel(s) has not undergone SHPD review, attach a photograph of the affected area, a schematic diagram (showing the well location, access road and infrastructure for the well), and a short description of the prior use(s) of the land on which the well resides.

*Please note: You are **strongly advised** to contact the SHPD to obtain a pre-review of your project. In the event that you do not get an HP pre-review and if during the course of either review or the permit itself it is determined that you need SHPD's concurrence, your application or permit may be held in abeyance or denied until issues with HP are resolved. To contact SHPD, please call 692-8015.

25. **Chapter 343** If an Environmental Assessment was completed, fill in the dates of publication and acceptance. For additional information about the proposed uses checkboxes, refer to http://luc.state.hi.us/docs/hrs_343.pdf
26. **Ground Water Use Permit No. (if applicable)** If a Ground Water Use Permit number has been obtained, identify it here.

SIGNATURES

27. **Well Driller** This section must be filled out completely for the Well Construction Permit application to be accepted as complete.
28. **Pump Installer** This section must be filled out completely for the Pump Installation Permit application to be accepted as complete.

**COMMISSION ON WATER RESOURCE MANAGEMENT
WELL CONSTRUCTION/PUMP INSTALLATION
PERMIT PROCESS WORKSHEET**

| Step | Description | Responsible Party | Legal Deadline |
|------|--|---|---|
| 1 | Ensure that if items 21 to 23 of the application are required, that they are obtained prior to applying for a permit. Otherwise, post-application comments obtained from these agencies may delay processing of your application. | Applicant | None |
| 2 | Application for Well Construction (or modification) and/or Pump Installation (or replacement with larger capacity than existing pump - see note B below). | Licensed Well Driller (for Well Construction) and/or Licensed Pump Contractor (for Pump Installation) (See note C below) | None |
| 3 | Issuance of Well Construction Permit to Well Driller (if applied for). | CWRM | Within 90 days of acceptance of completed application & contingent upon other agencies' legal requirements. (See note A below) |
| 4 | Issuance of Pump Installation Permit to Pump Installer (if applied for). | CWRM | Within 90 days of acceptance of completed application & contingent upon other agencies' legal requirements. (See note A below) |
| 5 | Execute/Sign Permit. | Licensed Well Driller or Licensed Pump Installer | Before work activity begins. |
| 6 | Start of Work Notice. | Licensed Well Driller or Licensed Pump Installer | 2 weeks prior to beginning of work activity. |
| 7 | Post copy of permit at the work site. | Licensed Well Driller or Licensed Pump Installer | During entire period of work activity at the site. |
| 8 | Construction of well. Note: a) If the well is to be abandoned during the course of the Well Construction Permit, and no further work is to be done, the applicant shall apply for and obtain a Well Abandonment Permit prior to doing any abandonment work. b) If the well is to be abandoned and relocated during the course of the Well Construction Permit, the applicant shall apply for and obtain a Well Abandonment Permit prior to doing any abandonment work, and a new Well Construction Permit shall be applied for and obtained prior to doing any new work (i.e. go back to step 1 above). | Licensed Well Driller | Within 2 years of issuance of Well Construction Permit. |
| 9 | Installation of a temporary test pump that can adequately conduct a step-drawdown test (if proposed pump > 70 gpm). | Licensed Well Driller or Licensed Pump Installer | Within 2 years of issuance of Well Construction Permit. |
| 10 | Installation of permanent pump. | Licensed Pump Installer | Within 2 years of issuance of Pump Installation Permit. |
| 11 | Application for permit extension (if required). | | None |
| 12 | Well Completion Report Part I (including Elevation Survey and Pump Tests, if applicable) to be returned completed to CWRM. | Licensed Well Driller | Within 60 days of completion of Well Construction (the date that ALL aspects of Well Completion Report Part I can be filled in). |
| 13 | Well Completion Report Part II to be returned to CWRM. | Licensed Pump Installer | Within 60 days of completion of Pump Installation (the date that ALL aspects of Well Completion Report Part II can be filled in). |
| 14 | Acceptance of Well Completion Report Part I, Elevation Survey. | CWRM | None |
| 15 | Issuance of Certificate of Well Construction Completion to Landowner. | CWRM | None |
| 16 | Acceptance of Well Completion Report Part II. | CWRM | None |
| 17 | Issuance of Certificate of Pump Installation Completion to Landowner. | CWRM | None |
| 18 | Pumpage may commence, Water Use Reporting required. | Well Operator | Monthly recording. |
| 19 | Abandonment (initiated in Step 2 of process). | Landowner | Until well sealed. |

NOTES:

- A. For non-compliance of other agencies' legal requirements that preclude the Commission from issuing a permit, your application may:
- Have the 90-day deadline for approval waived (at your request); or
 - Be denied and you can seek recourse at a Commission hearing.
- B. If a pump replacement of equal or less than the existing capacity is done, then only step 10 is required (Well Completion Report Part II).
- C. If a contractor is not selected, the application will not be accepted as complete, but may be routed for comments. If the application undergoes a satisfactory review, a letter of assurance will then be issued indicating that a permit will be issued upon selection of a contractor without outstanding issues with the Commission.