



State of Hawaii
COMMISSION ON WATER RESOURCE MANAGEMENT
 Department of Land and Natural Resources
WELL COMPLETION REPORT - PART I
Well Construction

For Official Use Only:

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.state.hi.us/dlnr/cwrm/>

1. State Well No.: _____ Well Name: _____ Island: _____
2. Address: _____ Tax Map Key: _____
3. Drilling Company: _____
4. Drilling method used during construction: Rotary Percussion Other (describe)
5. Date Well Construction (drilled,cased,grouted) completed: _____ Attach Completed Driller's Log
month/day/year
6. Was the subject well cored? Yes No
7. Step-Drawdown Test completed? No Yes Attach Step-Drawdown Test form (12/17/97 SDPTD Form)
8. Constant Rate Aquifer Test completed? No Yes Attach Constant Rate Aquifer Test form (12/17/97 CRPTD Form)

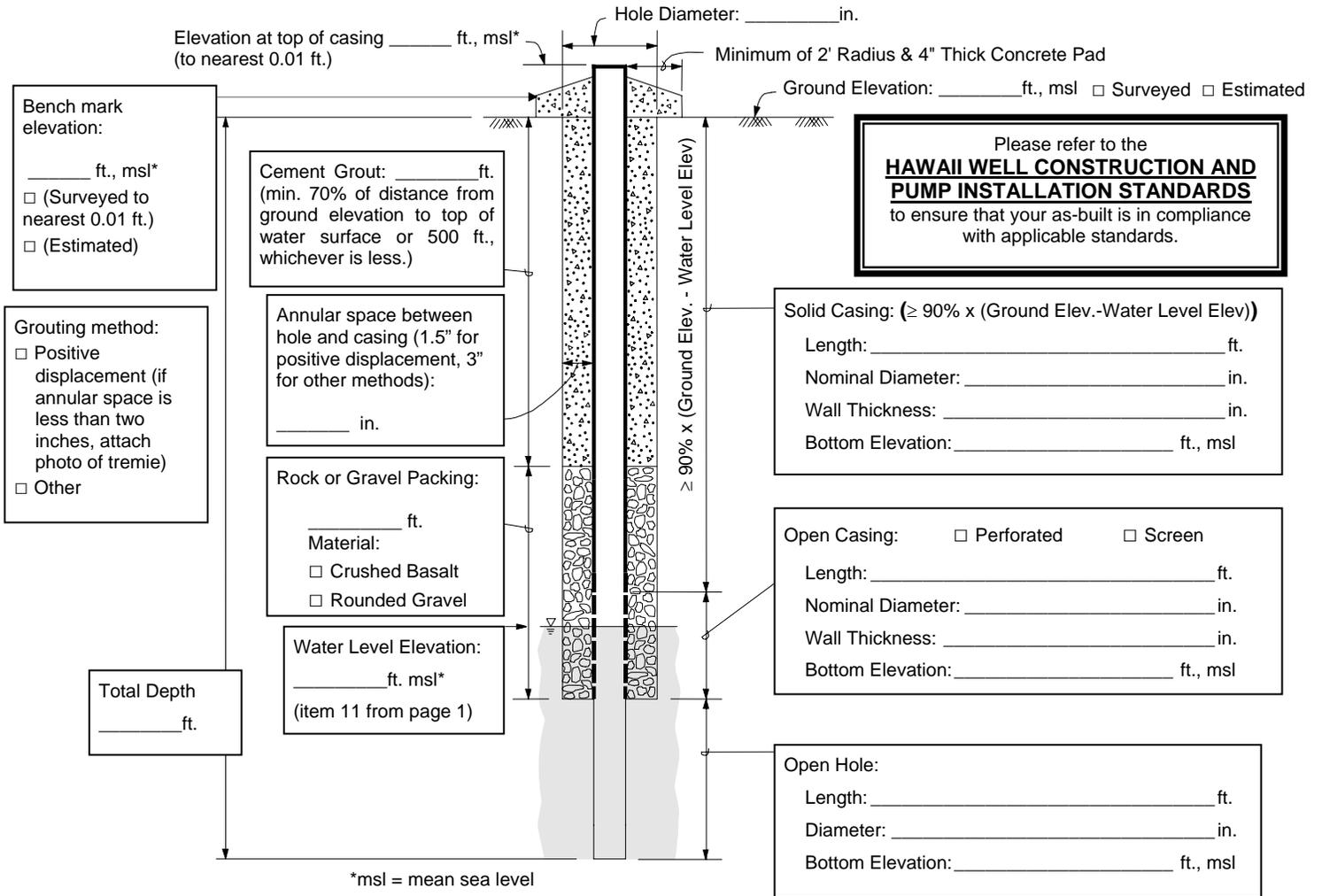
Water Level Data:	Reference point elevation	-	Depth to water (feet)	=	Water Level ft. above mean sea level (see note below)	Date/time of measurement
9. Initial encountered during drilling (this should also be filled in on the driller's log)	Ground = _____ ft. msl					
10. Just prior to casing installation	Ground = _____ ft. msl					
11. After casing installation (this information should be before any pump tests are performed with casing installed) Chloride: _____ ppm, Temperature: _____ °F	If this reference point is not the benchmark, the difference between the benchmark and this point is: _____ ft.					

note: for all elevations referenced to mean sea level, take the ground elevation (surveyed or estimated if survey not required at this time) and subtract the depth to the water level.

12. As-built section filled in completely
13. Photograph of well and concrete pad showing benchmark on concrete pad attached
14. GPS coordinates provided in degrees, minutes, seconds
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. Remarks: _____

Licensed Driller (print) _____ C-57 Lic. No. _____
 Signature _____ Date _____

12. AS-BUILT WELL SECTION (Please attach as-built if different from diagram provided below)



Solid Casing Material:

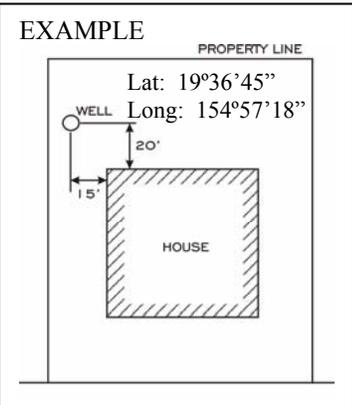
- Carbon Steel:** compliant with (check one or more): ANSI/AWWA C200 API Spec. 5L ASTM A53 ASTM A139
 And compliant with (check one or more): ASTM A242 or A606 Type E Type S Grade B Other
- Stainless Steel:** (check one): ASTM A409 (production wells) ASTM A312 (monitor wells)
- ABS Plastic** conforming 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
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 PTFE Fluorocarbon Tubing conforming to ASTM D3296
 FEP Fluorocarbon Tubing conforming to ASTM D3296

Attach photos of completed well and concrete pad

NAD83:
Latitude: ___ degrees ___ min ___ sec
Longitude: ___ degrees ___ min ___ sec



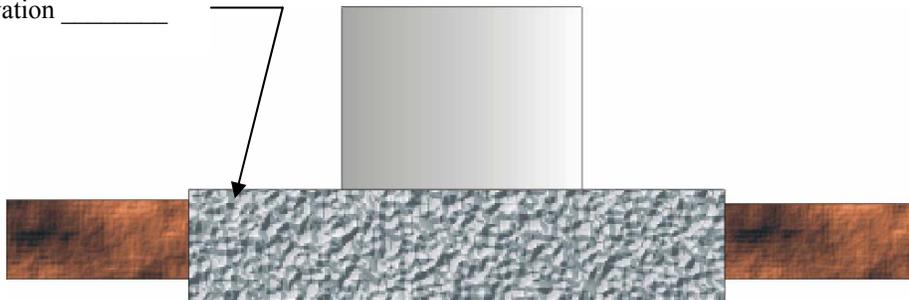
SKETCH OF WELL LOCATION

(Referenced to permanent landmark, i.e. building, road, fence, etc.)

Provide Latitude and Longitude of well referenced to NAD83 to nearest second

Well Elevation

Benchmark Elevation _____



Attach photos of completed well and concrete pad showing benchmark location.

I certify that the elevation shown above:

- 1) Was done in accordance with acceptable surveying practices
- 2) Is accurate to the nearest 0.01 ft.
- 3) Is referenced to mean sea level

Surveyor

License No.

Date