



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 e-mail PDF of completed application with attachments. A non-refundable filing fee of **\$300.00** must be mailed to the Commission, 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 | _____ () _____ - _____ - _____ : _____ parcel lot | | |
| 5. WELL COORDINATES (latitude and longitude, referenced to NAD 83, degrees, minutes, seconds to 1 decimal place) and ADDRESS (street, city, zip code) | | | | | | |
| The following must be attached before this application is accepted as complete: | | | | | | |
| <ul style="list-style-type: none"> Property tax map, showing well location referenced to established property boundaries Photograph of the proposed well site A photo or schematic diagram showing the well site, access road and proposed well infrastructure Attach written permission from the landowner listed below, that acknowledges the work proposed by this application. If the landowner changes during construction, a new permission statement is required. | | | | | | |
| 6. WELL OPERATOR'S NAME/COMPANY | | Well Operator's Contact | | 7. LANDOWNER'S NAME/COMPANY | | Landowner's Contact |
| 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 | 9. Construction Type | 11. Proposed Work | 13. Proposed Pump Capacity, gpm (gallons per minute) |
| <input type="checkbox"/> Construct New Well <input type="checkbox"/> Modify Existing Well <input type="checkbox"/> Abandon/Seal Well | <input type="checkbox"/> Drilled <input type="checkbox"/> Dug <input type="checkbox"/> Shaft <input type="checkbox"/> Tunnel | <input type="checkbox"/> Install New Pump <input type="checkbox"/> Replace Pump | |
| 10. Is this well part of a battery of wells? <input type="checkbox"/> Yes <input type="checkbox"/> No | | 12. Method of flow measurement | 14. Proposed Amount of Withdrawal, gpd (gallons per day) |
| | | <input type="checkbox"/> Totalizer flowmeter <input type="checkbox"/> Other (explain) | |

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 *If the well water will be treated, please describe how (reverse osmosis, ultra violet, etc.) and disposal method of resulting effluent, reject water, etc.*

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) | 23. Special Management Area Permit (SMAP) |
| <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"/> Well is in the Special Management Area <input type="checkbox"/> Required, SMA # _____ date approved _____ <input type="checkbox"/> Not Required (attach documentation from applicable County agency) |
| <input type="checkbox"/> Well is not in Conservation District | <input type="checkbox"/> Well is not in the Special Management Area |

24. **State Historic Preservation Division (SHPD) of the Department of Land and Natural Resources (Hawaii Revised Statute, Chapter 6E, Section 106)**
 I understand that after CWRM sends me a copy of the "SHPD concurrence request", that I must create a HICRIS record and upload the required documents described in the attached instructions.

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:

| | |
|---|--|
| <input type="checkbox"/> Use of state or county lands, or use of state or county funds | <input type="checkbox"/> A wastewater treatment unit |
| <input type="checkbox"/> Use within a state conservation district | <input type="checkbox"/> Waste-to-energy facility |
| <input type="checkbox"/> Use within a shoreline setback area | <input type="checkbox"/> Landfill |
| <input type="checkbox"/> Use within a national or Hawaii registered historic site | <input type="checkbox"/> Oil refinery |
| <input type="checkbox"/> Use within the Waikiki Special District | <input type="checkbox"/> Power-generating facility |
| <input type="checkbox"/> The construction, expansion or modification of helicopter facility | <input type="checkbox"/> None of the above 11 items |

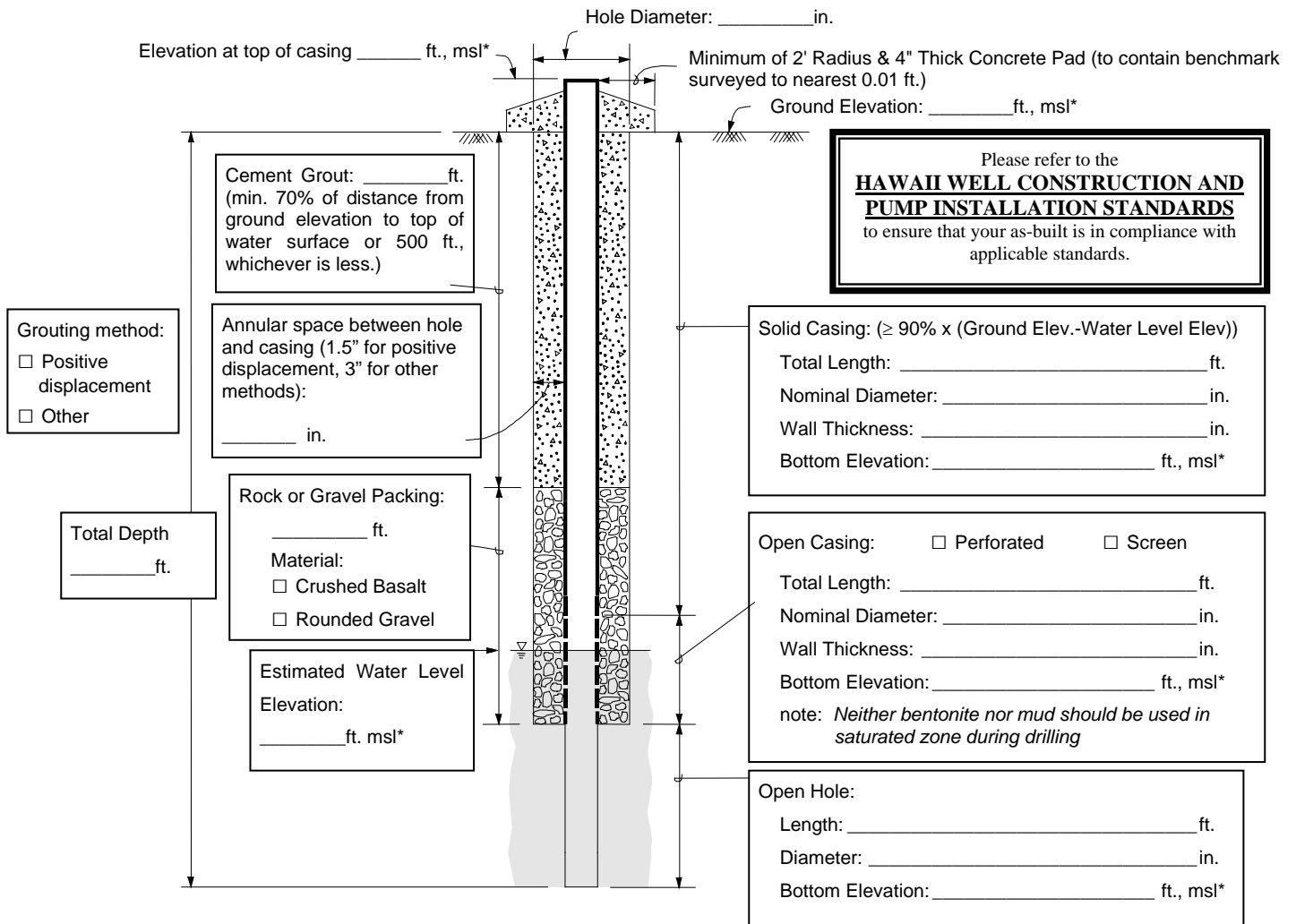
26. Water Use Permit No. (if applicable): _____

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 30 days after the completion date of the permitted work; 3) if the landowner changes during construction, a new permission statement is required; 4) 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) | 28. PUMP INSTALLER (Must be filled out if application is for Pump Installation) |
| Licensee business name _____ C-57 License No. _____ | Licensee business name _____ C-57/C-57a/A License No. _____ |
| Signature _____ Print _____ Date _____ | Signature _____ Print _____ Date _____ |
| Address _____ | Address _____ |
| Phone _____ Fax _____ E-mail _____ | 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 ¼ 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)
- A complete application must include the following:
 - Every line filled in completely.
 - A TMK map, photo of the well site, and a plan view of the well site, with the well location clearly marked.
 - For dug wells, attach a grading plan and cross section profiles showing existing and finish grades.
 - A document provided by the landowner that acknowledges the proposed work to be done described on the application.
 - Letters from appropriate agencies regarding items 22 to 24, if applicable.
 - Signature from a licensed contractor for well construction, pump installation, or well abandonment.
- Once the application is complete, you must do the following:
 - E-mail a PDF of the above required documents as a single PDF file, to the reviewer that you normally work with. Do not send an e-mail of the application to the main CWRM account.
 - Also attach a 6E form for SHPD to the same e-mail as a separate PDF file.
 - Prepare a check for the \$300 filing fee, payable to "The Department of Land and Natural Resources". This check must have the following: a) type "CWRM"; b) type TMK of the associated well; c) if space allows, type the well name (not well owner) that you specified on the application. Do not mail the application with the check. The check must be mailed 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 AND ADDRESS** 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. For address, fill in street number, street, city, and zip code.
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 amount of water that the applicant needs, on a daily basis, in gallons per day (gpd). If the well is in a groundwater management area and there is an approved water use permit, this amount should be the approved allocation described in the water use permit.

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

- Note: If the well water will be treated, describe how it will be treated (reverse osmosis, ultra violet, etc.), and the disposal method of the resulting effluent, reject water, etc. Attach any additional information, diagrams, etc., on separate sheets, if necessary.
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 16 through 20. 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**
The HICRIS system is SHPD's review portal. It is an intake system for projects and the repository of information for SHPD. The link is here: <https://shpd.hawaii.gov/hicris/landing>. Below are the procedures for a CWRM/SHPD submittal:

After your submission of the required documents to CWRM, and our subsequent determination of a completed application, CWRM will send you an acknowledgement letter acknowledging your application as complete. Attached to that letter will be a "SHPD concurrence request".

You must then create a HICRIS record and attach the following:

- a.) SHPD concurrence request
- b.) SHPD HRS 6E submittal form
- c.) The CWRM accepted & complete version of CWRM permit application with,
 - a. photographs,
 - b. TMK plat map,
 - c. construction site plans, and

- d. supporting documents (i.e., archaeological literature review and field inspection reports, previous SHPD reviews/correspondences, summary of previous archaeological studies conducted).

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 22 to 24 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 | Creation of HICRIS record with SHPD and upload of complete set of information required. | Licensed Well Driller or Licensed Pump Installer | As soon as possible after receiving "SHPD concurrence request". Delay in doing this may delay issuance of the permit(s). |
| 4 | 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) |
| 5 | 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) |
| 6 | Execute/Sign Permit. | Licensed Well Driller or Licensed Pump Installer | Before work activity begins. |
| 7 | Start of Work Notice. | Licensed Well Driller or Licensed Pump Installer | 2 weeks prior to beginning of work activity. |
| 8 | Post copy of permit at the work site. | Licensed Well Driller or Licensed Pump Installer | During entire period of work activity at the site. |
| 9 | 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. |
| 10 | 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. |
| 11 | Installation of permanent pump. | Licensed Pump Installer | Within 2 years of issuance of Pump Installation Permit. |
| 12 | Application for permit extension (if required). | | None |
| 13 | Well Completion Report Part I (including Elevation Survey and Pump Tests, if applicable) to be returned completed to CWRM. | Licensed Well Driller | Within 30 days of completion of Well Construction (the date that ALL aspects of Well Completion Report Part I can be filled in). |
| 14 | Well Completion Report Part II to be returned to CWRM. | Licensed Pump Installer | Within 30 days of completion of Pump Installation (the date that ALL aspects of Well Completion Report Part II can be filled in). |
| 15 | Acceptance of Well Completion Report Part I, Elevation Survey. | CWRM | None |
| 16 | Issuance of Certificate of Well Construction Completion to Landowner. | CWRM | None |
| 17 | Acceptance of Well Completion Report Part II. | CWRM | None |
| 18 | Issuance of Certificate of Pump Installation Completion to Landowner. | CWRM | None |
| 19 | Pumpage may commence, Water Use Reporting required. | Well Operator | Monthly recording. |
| 20 | 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:
- a) Have the 90-day deadline for approval waived (at your request); or
 - b) 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 14 is required (Well Completion Report Part II).