



STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. BOX 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File: SDWB
3094May01

May 24, 2021

Mr. Harry Takiue, P.E.
District Engineer
Highways Division, Hawaii District
Department of Transportation
State of Hawaii
50 Makaala Street
Hilo, Hawaii 96720
[via harry.h.takiue@hawaii.gov only]

Dear Mr. Takiue:

SUBJECT: **KUAKINI HIGHWAY DRAINAGE IMPROVEMENTS,
VICINITY OF MILE POST 114
UNDERGROUND INJECTION CONTROL (UIC)
UIC APPLICATION NO. UH-3094
GRANTED APPROVAL-TO-CONSTRUCT (ATC)
TWO (2) DRAINAGE INJECTION WELLS**

This ATC is hereby granted to you, the applicant, strictly based on the following twelve (12) conditions. These conditions, unless identified as a recommendation, are enforceable under Hawaii Administrative Rules (HAR), Sections 11-23-07(c) and (d). Enforcement may include, and not be limited to, monetary penalties and corrective action paid by the applicant.

1. Only applicable are the information, specifications, and plans that were provided in the UIC application dated February 22, 2021. All other types or forms of information/materials are not applicable unless acknowledged and approved by this ATC;
2. The drainage injection well amount per the application are two (2).

The approximate diameter and depth below ground surface of the injection wells are:

Well Number	Diameter (in inches)	Depth (in feet)
1	20	60
2	20	60

The proposed injectant is generally categorized as surface runoff generated from rainfall over pavement and yards or fields areas whether altered or unaltered by property improvements;

3. Any modification or revision to the drainage injection wells' particulars, including the facility and application, shall not occur unless such proposals are first submitted to the UIC program for review, concurrence, and written approval under this ATC. Any modification, revision, or construction involving the injection wells done without written authorization will constitute a violation of HAR, Chapter 11-23;

4. Operation of the drainage injection wells are not automatically authorized by this ATC. Furthermore, construction and testing of the drainage injection wells do not guarantee that the drainage injection wells will be authorized for operation under a UIC permit. Depending on the information obtained during and from construction and testing, a UIC permit may or may not be issued;
5. The applicant is responsible to identify all drinking water sources around the injection wells in order to prevent injection well siting within one-quarter mile of any existing drinking water source. Identifying water sources may require field activities as well as records research. Noncompliance with this requirement may result in improper injection well siting needing corrective action by the applicant which includes proper backfilling and abandonment of the injection well;
6. If an artesian groundwater condition is encountered during injection well drilling/construction, drilling shall immediately stop and not proceed until the artesian condition is assessed by the DOH. The applicant is required to promptly notify the DOH for an assessment. An artesian groundwater condition may warrant a redesign of the injection well in order to protect the artesian aquifer as an underground source of drinking water. For reference, artesian aquifer requirements and restrictions are described under HAR, Section 11-23-10;
7. If a void, such as a lava tube or solution cavity, three (3) feet or more in diameter or vertical measurement is encountered during injection well drilling/construction, drilling shall immediately stop and not proceed until the void is assessed by the Department of Health (DOH). The applicant is required to promptly notify the DOH for an assessment. A void may warrant a redesign of the injection well in order to prevent unacceptable migration of the injectant or to prevent direct injection into the void. For reference, voids are described under HAR, Section 11-23-09 (f);
8. Each drainage injection well shall be constructed to allow for the following continuous or periodic, permit-required activities related to operating and maintaining a drainage injection well: injection well access, injection well depth and diameter measurement, injectant flow measurement (quantity metering) when applicable, injectant pressure measurement (metering) when applicable, and injection performance testing;
9. Pursuant to HAR, Section 11-23-13, submit the final report for the enclosed outline: "Final Report Form For Drainage Injection Wells." This report shall be made and signed by a geologist and a professional engineer, including the P.E. stamp. The engineer and geologist shall be responsible for monitoring the proper construction of the injection wells and for obtaining the information needed to complete the final report. Please remember that the injection wells must be inspected by the geologist before any liners or concrete rings are installed. This inspection is necessary to produce the lithologic log of the injection wells;
10. The final report is due no later than May 23, 2023. The final report shall be fully complete and satisfactory. Unless the final report is submitted by the due date, this ATC automatically expires and is void. A late final report may subject the applicant to an enforcement action/penalty or corrective measures, including a permit reapplication. If more time beyond the due-date is needed to complete the final report, a written request

with reasons for a time extension must be submitted at least 60 days before the due-date. Time extensions are not guaranteed, and if granted, may contain restrictive conditions;

11. Backfilling and abandonment of an injection well, should such an activity become necessary, whether during construction or after full well completion, may only occur under the instructions from the DOH. An abandonment application must first be submitted, and specific abandonment instructions will be issued by the DOH. Drilling contractors under their own discretion should not backfill and abandon an injection well; and
12. Rainfall runoff flowing into a newly constructed injection well might occur, and such a condition does not necessarily trigger a violation for using the injection well without a UIC permit. However, unless the applicant proceeds expeditiously in completing the application requirements to obtain the UIC permit, the DOH may pursue corrective measures and penalties through enforcement.

If you have any questions about the final report, or the processing of your application, please contact Mr. Mark Frazier of the SDWB UIC Program at (808) 586-4258 or call from the Big Island using the direct toll-free number 974-4000, ext. 64258 or by email at sdwb@doh.hawaii.gov.

Sincerely,



JOANNA L. SETO, P.E., CHIEF
Environmental Management Division

MF:bbe

Enclosure: Final Report Form For Drainage Injection Wells

c: Mr. Randall Urasaki, P.E., WSP (w/encl.) [via randall.urasaki@wsp.com only]
Ms. Jan Reichelderfer, WSP (w/encl.) [via Jan.Reichelderfer@wsp.com only]

FINAL REPORT FORM FOR
DRAINAGE INJECTION WELLS
UNDERGROUND INJECTION CONTROL (UIC)
UIC APPLICATION NO. **UH-3094**

For Office Use

1. Facility Name: _____
Address: _____
_____ Project's TMK: _____
2. Central Coordinates: Latitude: _____ Longitude: _____ NAD: _____
3. Name of Owner: _____
Address: _____
4. Name of Operator: _____
Address: _____
5. Drainage Injection Well System: (account for all constructed wells!)
Number of Drainage Injection Wells: _____
Design Capacity (total): _____ Date(s) of Construction: _____
Injection Well Dedication: [] yes [] no To: _____
Describe any approved changes from original proposal: _____

<u>Drainage Injection Well No.</u>	<u>As-Blt. Diameter</u>	<u>As-Blt. Depth</u>	<u>Grd. Elev.</u>
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6. Hydrogeologic Characteristics: **Attach the following to this report:**
 - a. Lithology (geologic profile including soil and rock descriptions, and geologic conditions of significance) of the following drainage injection well: 1 and 2
 - b. Injection test results which shall include a brief description of the test and shall state the maximum rate of discharge into the drainage injection well. Injection testing shall be conducted on drainage injection well: 1 and 2
7. Attach an as-built drainage injection well location plan on an 8 1/2" x 11" or 14" OR 11" x 17" paper.
8. This report shall include the Department of Health's "Signatory and Certification Statement" signed and dated by the operator or legal representative of the facility.
9. This report must be signed by the geologist and licensed engineer and shall bear the engineer's stamp.
10. The date of this Final Report is _____.

**SIGNATORY AND CERTIFICATION STATEMENT
FOR UNDERGROUND INJECTION CONTROL (UIC) SUBMITTALS**
*Submitted Statement shall bear an original signature and date.
Photocopy signatures are unsatisfactory.*

Facility Name: _____

e-Permitting Submission No. (if applicable) _____

UIC No. (if assigned): _____

Please check one:

- ☐ I certify that for a municipality, I am a principal executive officer or ranking elected official.
- ☐ I certify that for a state, non-federal or other public agency, I am a principal executive officer or ranking elected official.
- ☐ I certify that for a federal agency, I am the chief executive officer of the agency, or I am the senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency.
- ☐ I certify that I am a general partner for a partnership.
- ☐ I certify that I am the proprietor for a sole proprietorship.
- ☐ I certify that I am a trustee for a trust.
- ☐ I certify that for a corporation/association of apartment owners/home owners association, I am the President, Vice President, Secretary or Treasurer of the corporation/association of apartment owners/home owners association and in charge of a principal business function, or I perform similar policy or decision making functions for the corporation/association of apartment owners/home owners association.
- ☐ I certify that for a corporation, I am the manager of one or more manufacturing, production or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), and authority to sign documents has been assigned or delegated to me in accordance with corporate procedures.
- ☐ I certify that for a limited liability company (LLC), I am the Manager or a Member authorized to make management decisions for the LLC and am in charge of a principal business function, or I perform similar policy or decision making functions for the LLC.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature: _____ Date: _____

Name (Print): _____ Title: _____

Company Name: _____

Address: _____

Phone Number: _____ Fax Number: _____

Email: _____