

0898-049

APPENDIX E

APPLICATION FOR WELL OPERATING PERMIT

Complete Items No. 1 through 25 and submit application fee as set forth in the Water Resource Development and Operating Regulations. No application fee is required for monitoring wells. Make checks payable to the Treasurer of Guam.

I. Background Information: Marbo Well #2

1. Date of Application:

2. Type of Application:

☐ New☒ Extension Previous Well Operating
Numbers: ~~1087-71~~
0692-40

3. Name of Well Owner: William W. Hodges, Colonel, USAF

Mailing Address: 36 ABW/CC
Unit 14003
APO AP 96543-4003

Telephone: 366-3226

4. Name of Owner of property on which well is located:

Andersen Air Force Base

II. Well Information:

5. Type of Well (indicate one):

- ☒ Public Water Supply Well
- ☐ Individual Domestic Well
- ☐ Industrial Well
- ☐ Recharge or Injection Well
- ☐ Agricultural Well
- ☐ Monitoring Well
- ☐ Irrigation Well (Golf Course)
- ☐ Grounding Well
- ☐ Others:

M#2

6. Purpose for which water is to be used:

Public Water Supply

7. Pumping Rates:

Design Pumping Rate : 225 gpm
Maximum Pumping Rate: 225 gpm

8. Estimated Hours of Operation:

24 hours per day
30 days per month
12 months per year

9. Estimated volume of water to be pumped on an annual basis:

225GPM X 60min/h X 24h/d X 30d/mo X 12mo/yr = 117 million gal/yr

III. Well Location:

10. Provide a plot plan drawn to a scale of 1" = 50' showing known references such as streets, property lines, and survey monuments, including GGTN coordinates of the well to the nearest foot. See Map (4).

IV. Well Drilling Summary:

11. Period of well drilling:

Starting Date: 9 Feb 45
Completion Date: 10 Mar 45

12. Well Drilling Contractor: Not Available

13. Well Drilling Permit No.: Not Available

14. Total Depth of Well: 379 feet

Elevation (MSL) of Ground Surface at Casing: 350.89 feet
Elevation (MSL) of Top of Well Casing: 351.43 feet

M#2

15. Describe Method and Type of Drilling:

Rotary

16. Casing:

Casing Hole Diameter: 10 inches

Depth (length from surface): 386.5 feet

Casing Type: Size: (ID): 10 inches

Wall Thickness: 3/16 inches

Weight: pounds

Material: Steel

Describe the procedures of the installation of casing:

Not Available

17. Well Screen:

Screen Type (ID): Perforation Slot Size: 1x6 inches

Screen Diameter: inches Material: Bronze

Location (from surface): feet to feet

Describe Method of Installation:

Not Available

18. Cement Grouting:

Material: Cement

Total Depth: 8 feet

Gravel Size: N/A inches

Annular Thickness: feet

M#2

Cubic Yards of Cement Placed: Not Available

Describe Method of Grouting Used and Emplacement Procedures:

Not Available

19. Describe Well Development Method(s): Not Available

V. Well Construction Summary:

20. Flow Measurement and Testing, if performed;

Pump Capacity: 225 gpm

Static Water Level: 2 feet

Pumping Water Level: feet

Air Line Length: none

Top Elevation (MSL): 350.89 feet

Bottom Elevation (MSL): -27.61 feet

Specific Capacity at Test: gpm

Describe Method Used for Flow Measurement and Testing: Metered

22. Provide a plan(s) of the well showing the following information:

(a) Control valves, sampling tap(s), misc. fittings and appurtenances, and discharge piping;

(b) Flow metering device, including size, and flow range and manufacturer;

(c) Vertical cross-section of the well showing details of the casing, grouting, pump setting, gravel pack, water level measurement devices;

(d) Chlorination and fluoridation equipment; and

(e) Elevation and location of permanent benchmark.

23. Describe provisions for protecting the wellhead from erosion and animals and other contamination by specifying provisions for sanitary well seal, casing height above ground, and flood level elevation, etc.

Protected by a reinforced concrete building.

24. Describe methods and procedures used for disinfecting the well:

Chlorination

25. If not previously submitted, attach a log of the well to the application.

VI. Signature:

I, William W. Hodges, Colonel, USAF, Base Commander, state that I have knowledge of the facts herein set and that the same are true and correct to the best of my knowledge and belief and are made on good faith.

Signature: *Thomas M. Hodges* ^{GS-13} Date: *8/3/98*
Or William W. Hodges

(For Agency Use Only)

Inspection of the well facilities was conducted on _____

by _____

Findings: _____

Water sample taken on _____ by _____

Results of the water quality analyses are attached.

Reviewed by the Chief Engineer:

_____ Date _____

Recommendations:

- ☐ Approved
- ☐ Disapproved

Reasons for disapproval:

Signed:

_____ Date _____
Administrator

Well No. _____

Well Operating Permit No. _____

Date Issued _____

Expiration Date _____