

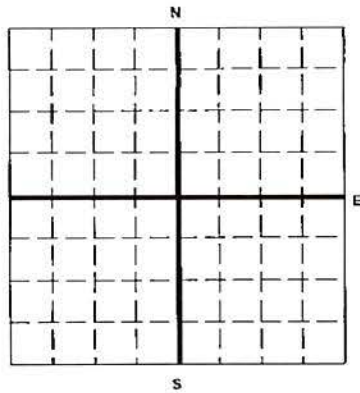


United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee EnerVest Operating, LLC; 300 Capitol Street, Suite 200 Charleston, WV 25301	Name and Address of Surface Owner Heartwood Forest Fund IV, L.P. c/o The Forestland Group, LLC PO Box 1155, Lebanon, VA 24266-1155
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Locate Well and Outline Unit on Section Plat - 640 Acres



State Virginia	County Dickenson	Permit Number VAS2D957BDIC
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Surface Location Description
 ___ 1/4 of ___ 1/4 of ___ 1/4 of ___ 1/4 of Section ___ Township Range

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location
 Location ft. frm (N/S) ___ Line of quarter section
 and ft. from (E/W) ___ Line of quarter section.

WELL ACTIVITY	TYPE OF PERMIT
<input checked="" type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Area Number of Wells ___

RECEIVED
EPA REGION III
JAN 28 2019
GROUND WATER PROTECTION
DIVISION

Lease Name Heartwood Forestland Fund IV Well Number P-205 (750205)

INJECTION PRESSURE				TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2018		335.05	620.00	12,597			
February-2018		448.95	639.00	16,808			
March-2018		455.81	625.00	15,797			
April-2018		502.62	648.00	18,306			
May-2018		521.36	650.00	19,406			
June-2018		389.52	531.00	16,261			
July-2018		452.67	711.00	15,603			
August-2018		451.62	647.00	17,927			
September-2018		328.11	586.00	14,207			
October-2018		421.17	594.00	17,063			
November-2018		371.00	562.00	13,311			
December-2018		402.68	546.00	12,154			

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print) Kevin Miller, Vice President & General Manager	Signature 	Date Signed 1/18/2019
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Total bbls - 189,440

Compliance Review Completed
 WMS updated
 Pdf to G:File Rem

Max pressure - 1,068