



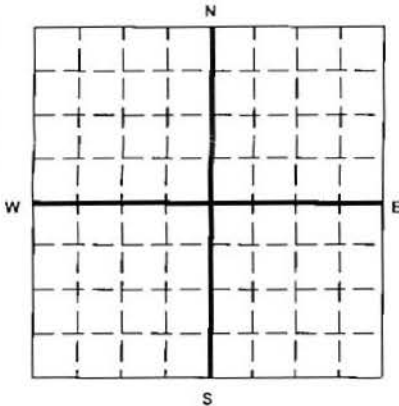
United States Environmental Protection Agency
Washington, DC 20460

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

Locate Well and Outline Unit on
Section Plat - 640 Acres



State: Virginia County: Dickenson Permit Number: VAS2D957BDIC

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

- WELL ACTIVITY TYPE OF PERMIT
- Brine Disposal Individual
 - Enhanced Recovery Area
 - Hydrocarbon Storage
- Number of Wells ___

RECEIVED
EPA REGION II
FEB 05 2018
GROUND WATER & ENFORCEMENT
(310P22)

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

MONTH	YEAR	INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
		AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2017		454.2	593.0	12,400			
February-2017		399.95	574.0	11,615			
March-2017		427.70	571.0	15,197			
April-2017		447.47	591.0	13,721			
May-2017		405.45	536.0	16,954			
June-2017		402.82	680.0	26,088			
July-2017		611.0	722.0	22,765			
August-2017		567.0	682.0	22,935			
September-2017		605.60	685.0	20,883			
October-2017		535.82	686.0	19,645			
November-2017		525.85	669.0	15,764			
December-2017		500.95	649.0	16,991			

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)
James McKinney, Sr. Vice President & General Manager

Signature
[Handwritten Signature]

Date Signed
1/17/18

Total bbls = 214,958

Compliance Review Completed
WMP updated
Pdf to G-Drive 1/20/18

P-MAX = 1170