

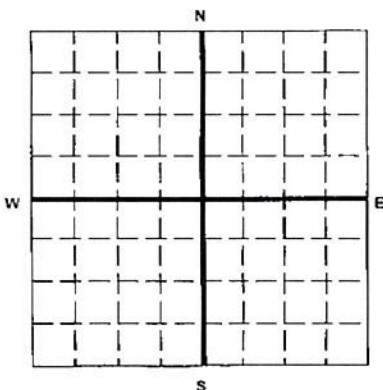


United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee EnerVest Operating, LLC; 300 Capitol Street, Suite 200 Charleston, West Virginia 25301	Name and Address of Surface Owner Heartwood Forestland 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 VAS2D907BDIC
Surface Location Descriptor ___ 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 <input checked="" type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Area Number of Wells ___
Lease Name Jesse Wampler Farm		Well Number P-143

RECEIVED
 EPA REGION III
 JAN 28 2019
 GROUND WATER & ENFORCEMENT
 (3WP22)

MONTH	YEAR	INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
		AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January-2018		512.09	713.00	6,102			
February-2018		597.67	790.00	7,618			
March-2018		621.05	803.00	9,785			
April-2018		656.00	815.00	9,864			
May-2018		670.64	802.00	12,747			
June-2018		707.76	836.00	17,016			
July-2018		674.14	833.00	14,924			
August-2018		595.33	805.00	11,033			
September-2018		648.00	801.00	10,520			
October-2018		579.78	701.00	7,806			
November-2018		525.05	625.00	4,727			
December-2018		592.11	800.00	9,190			

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 - 121,332

Compliance Review Completed
 WMS updated
 Pdf to @: file rm

MAX Pressure - 990