

Instructions

To receive your revenue/royalty payments directly into your checking or savings account:

- **Complete and sign this application**
- **Enclose an original voided check from your account or an original document from your financial institution with letterhead stating**
 - your name
 - type of account
 - account number and
 - routing number

All fields are required unless noted otherwise. The application **cannot** be processed without an original voided check or an original document from your financial institution providing your account information.

Please mail your application to:

XTO Energy Inc.
Attn: Revenue and Processing Services
110 W. 7th Street
Fort Worth, TX 76102

Please allow 4–8 weeks for setup, change, or termination of automated payments. Pending testing and authorization of your banking information, you will continue to receive physical checks via U.S. Mail.

If you have questions, please contact XTO Interest Owner Relations Group:
1-866-886-2613

**Include original Check
or Bank Letter**
**Please do not send a
Temporary Check or
Check copy**

XTO Energy Inc.

An ExxonMobil Subsidiary

Interest Owner Relations Group
1-866-886-2613

Direct Deposit Enrollment/ Change Authorization Form

No more waiting for your checks to arrive. Enjoy the ease and security of automatically receiving your revenues directly into your checking or savings account with XTO's direct deposit service. Under no circumstance can XTO view your account's private information. This service is optional and provided for your convenience at no charge to you.



Authorization Agreement for Direct Deposit

I (we), hereinafter "Owner", do hereby authorize XTO Energy Inc. ("XTO") to make direct deposit payments to the financial institution and account designated herein. If the funds deposited are determined to be fraudulent, duplicate or made in error, Owner authorizes XTO to direct Owner's financial institution to return from Owner's account the funds to which Owner is not entitled, not to exceed the original amount of the erroneous payment. Owner does hereby release and hold XTO harmless for any loss, claim, or damage incurred as the result of Owner's financial institution's failure to properly or promptly post any payment. Either Owner and/or XTO shall have the right to terminate this agreement at any time and resume payments via physical check to the address on file for Owner.

All fields are required unless noted.

STEP ONE:

Owner Signature(s)

ORIGINAL SIGNATURE(S) REQUIRED

All signatures required for joint XTO accounts

X _____

X _____

X _____

Date _____



STEP TWO:

Owner Information

Please select one: New Request
 Change Request

XTO Owner Number (located on check detail)

Owner Name

Last 4 digits of Tax ID or Social Security Number

(required for verification, **must** match the number on file with XTO)

X X X—X X— _____

Mailing Address

City _____ State _____

Zip _____

Owner Phone Number _____

Owner Fax Number (optional) _____

Owner E-Mail Address (optional) _____

STEP THREE: Check this box to **change the address** currently on file with XTO to the one listed above.

STEP FOUR:

Banking Information

Name on Bank Account _____

Bank Name _____

City _____ State _____

Account Type (Select one):

Checking _____ Savings _____

ABA Routing Number (Nine digit number listed on the bottom of your check)

Account Number _____

STEP FIVE:

You must enclose an original voided check or an original document from your financial institution.

See Instructions on reverse side for details.

STEP SIX:

Check Detail Election

Unless requested, check detail will not be mailed as it is available via XTO's internet website at www.xtoenergy.com. Click on the link titled "Interest Owner Relations".

Check here if a paper copy of your check detail is requested to be sent via the U.S. Mail to the address on file.