

HIGHLANDER OIL & GAS

Electronic Funds Transfer (ACH) Authorization Agreement

Please allow 60 days for implementation

Please check one: ☐ New Information ☐ Change Existing Information ☐ Cancel

OWNER INFORMATION

Revenue/Interest Owner Name

Owner Number Required for Setup (Refer to Your Last Check Payment)

Remit To: Address or P.O. Box

Telephone Number

Suite Number

E-mail Address

City/State/Zip Code

Tax ID or Social Security Number

BANK INFORMATION & ACH INSTRUCTIONS

Bank Name

Bank Telephone Number

Name on Account

Type of Account (Check One) ☐ Checking ☐ Savings

Bank ABA/Routing Number for ACH Payments (Must be 9 Digits)

Bank Account Number

MUST ATTACH A VOIDED CHECK OR ACH PAYMENT INSTRUCTIONS FROM YOUR BANK ON BANK LETTERHEAD

AUTHORIZATION

The undersigned represents that it owns oil, gas and/or mineral interests, the proceeds of which are currently distributed by Highlander and authorizes Highlander and the financial institution listed on this form to electronically deposit future payments to the account specified and, if necessary, debit any incorrect payments. This authorization is to remain in effect until a new authorization is filed with Highlander.

The undersigned waives its rights to receive a printed copy of the check detail and agrees to view or print a copy of the transaction detail through <https://app.energylink.com/Public/Signup.aspx>. Highlander will not be liable for, and the undersigned will hold Highlander harmless for any loss, claims damage, interest or fees incurred as a result of financial institution's failure to properly post funds.

NOTE: If interest is jointly held, ALL parties must sign below

Signature of Owner, Trustee, Executor or Authorized Person

Joint Signature (if applicable)

Printed Name

Printed Name

Date

Date

PLEASE RETURN THIS FORM (WITH YOUR VOIDED CHECK OR BANK LETTER) TO:

highlanderOR@highlanderog.com
(preferred)

OR

Highlander Oil & Gas Assets LLC
Attn: Land Administration
420 Throckmorton Street, Suite 550
Fort Worth, Texas 76102