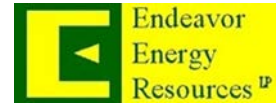


# CHANGED AUTHORIZATION AGREEMENT FOR ELECTRONIC FUNDS TRANSFER (EFT)

RETURN BY MAIL TO:



ATTN: Revenue Department  
110 N. Marienfeld Ste. #200  
Midland, TX 79701

E-MAIL TO: [RevenueHelp@eeronline.com](mailto:RevenueHelp@eeronline.com)

OR FAX TO: (863) 246-0114

ATTN: Revenue Department

**Changed EFT Bank/Account Information**

Change Contact Name or Phone Number

(Type or Print in Ink)

**OWNER# \_\_\_\_\_ (Five Digits)**

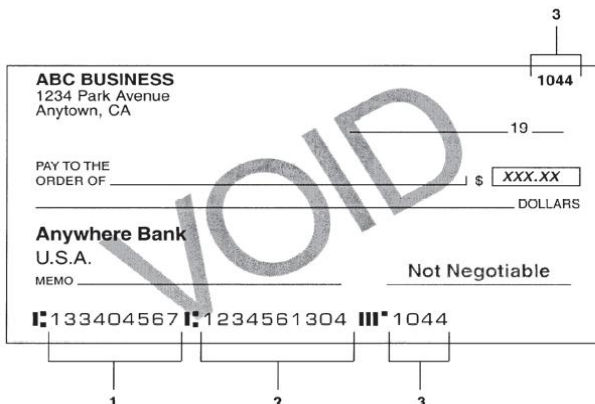
SECTION I	
CONTACT NAME:	For Office Use - CODE
NAME ON ENDEAVOR ACCOUNT (Individual, Company, Trust)	CONTACT PHONE NUMBER
E-MAIL ADDRESS (if available)	Soc. Sec. No. or Tax ID

SECTION II		
<p>Endeavor Energy Resources, LP is hereby requesting authority from the above-named individual/entity to initiate ACH credit transactions to the below-named bank account. This ACH authorization is valid from the effective date hereof until such time as this authorization is terminated <u>in writing</u> by the undersigned. The person whose name appears below indemnifies and hereby holds harmless the named financial institution of any and all claims made or asserted by either party hereto. This authorization may be assigned in whole to a third party without notice to any party to this agreement.</p>		
FINANCIAL INSTITUTION	<b>SPECIFY ACCOUNT TYPE:</b> <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> CREDIT UNION <input type="checkbox"/> OTHER	
NAME ON ACCOUNT		
FINANCIAL INSTITUTION ADDRESS		
CITY STATE ZIP		
BANK ACCOUNT NUMBER (NOT TO EXCEED 17 DIGITS)	ROUTING NUMBER (REQUIRES 9 DIGITS)	
OWNER SIGNATURE ( <i>MUST be the Owner or Name on Account</i> )	TITLE	DATE
AUTHORIZED CO-SIGNATURE (if applicable)	TITLE	DATE

**Important: Temporary Checks/Hand-written Deposit Slips ARE NOT ACCEPTABLE. Address MUST appear on Voided Check.**

Attach a **voided check for a checking account OR your institution's Direct Deposit form for a savings account** & return your completed form as listed above. If your account is for deposits ONLY and no checks are available, please submit your financial institution's *Direct Deposit Form* for ACH deposits. New EFTs generally take 60-90 days for processing from the date received. **Incomplete forms will cause a longer delay in processing.** Please keep a copy for your records.

The example below of a voided check indicates where to locate the routing number and bank account number, which are needed for verification of your financial institution; this information will avoid delays in receiving your ACH payment.



- 1 Routing Number (requires 9 digits)
- 2 Bank Account Number (not to exceed 17 digits)
- 3 Check Number

By signing below, I hereby request that Endeavor reduce my Minimum Suspense release amount from \$100 to \$50.

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**Did you remember to:**  
(Please X when done)

- Write in your five-digit Owner #?
- Write your SS# or Tax ID/EIN?
- Attach a voided check & deposit slip?
- Sign your form?

**Thank you for selecting Direct Deposit!!**