INSTRUCTIONS FOR COMPLETING HEIRSHIP AFFIDAVIT

READ INSTRUCTIONS IN THEIR ENTIRETY BEFORE COMPLETING THIS FORM.

IF THE DECEDENT HAS A **PROBATED WILL**, DO NOT PROCEED WITH THIS FORM. INSTEAD, PLEASE PROVIDE THE FOLLOWING DOCUMENTS TO THE EMAIL OR ADDRESS BELOW:

- A certified copy of the death certificate.
- A copy of the Last Will & Testament, Letters Testamentary, and Order Admitting Will to Probate that is recorded in the county where the property is located.
- A completed W-9 for each heir and/or beneficiaries.

IMPORTANT – REMOVE THIS PAGE BEFORE RECORDING DOCUMENT. FAILURE TO REMOVE THIS PAGE WILL RESULT IN ADDITIONAL RECORDING FEES BY THE COUNTY CLERK.

NOTE: If any heirs of the decedent are deceased, a separate affidavit of heirship or documents required for a probated will (see above) as to each heir is REQUIRED.

Instructions for completing Affidavit:

Both the 1st signature and the Corroborating Affidavit signature <u>MUST</u> be signed by a person that is <u>NOT</u> an immediate family member or someone that is a direct heir. This form must be signed in the presence of a Notary Public and recorded in county/parish clerk records where the well(s)/land(s) are located.

Once the affidavit has been filed of record in the appropriate county/parish and returned to you, a RECORDED COPY, along with a copy of the DEATH CERTIFICATE must be furnished to our office via email to: ownerrelations@sabineoil.com or mailed to:

Sabine Oil & Gas ATTN: DIVISION ORDERS 1415 Louisiana, Suite 1600 Houston, TX 77002

When submitting documents to our office, it is recommended that you retain the any originals and only provide copies.

When sending the recorded Affidavit to our office, we must be provided with a completed W-9, which can be found on our website (https://www.sabineoil.com/forms), for all heirs and/or beneficiaries. Failure to provide this information will delay processing.

SABINE RESERVES THE RIGHT TO ACCEPT OR DENY AN AFFIDAVIT OF HEIRSHIP OR ANY OTHER DOCUMENTATION SUBMITTED, BASED ON VARIOUS CRITERIA, INCLUDING BUT NOT LIMITED TO THE AMOUNT OF THE FUNDS, ACREAGE HELD BY THE DECEASED, OR NUMBER OF WELLS. FURTHER INFORMATION OR ACTIONS MAY BE NECESSARY GIVEN THE SPECIFIC CIRCUMSTANCES REGARDING THE ESTATE.

AFFIDAVIT OF HEIRSHIP

NOTE: TRANSFER OF OWNERSHIP WILL BE BASED UPON THE LAWS OF DESCENT AND DISTRIBUTION OF THE STATE IN WHICH THE PROPERTY IS LOCATED.

Affidavit of facts concerning the identity	y of heirs for the estate of
PERSON COMLETING THIS FORM	(affiant) being of lawful age, being first duly sworn, upon oath deposes and says:
	SECTION A. AFFIANT INFORMATION
. My name is:	
My current address is:	
I have personal knowledge of the fan	nily history and facts of heirship of:
	NAME OF DECEASED PERSON (DECEDENT) benefit from the decedent's estate. True
The decedent was myRELATION	I knew the decedent for years.
	SECTION B. DECEDENT INFORMATION
	, being years old the date of their death, in County/Parish, State of
Decedent left a will:	0
If yes, was the will probated?: \Box Ye	os No If yes, this form is not required and the claimant should submit the required documents for a probated will. If no, continue completing this form. The claimant must provide a complete copy of the will along with this form.
Decedent owned, at the time of thei of	r death, land or interest situated in County/Parish, State
The land/interest described above w	vas: Community Property - Acquired during marriage and NOT by gift or inheritance Separate Property - Acquired by gift, inheritance, or while decedent was NOT married
	SECTION C. MARITAL AND FAMILY HISTORY
3. Did the decedent have:	
a. A surviving spouse at the time of	
 b. Surviving children or children's of 	descendants at the time of death? 🔛 Yes 📙 No

If no to both a & b, proceed to #7.

NAME OF CHILD re any of the children listed in #5 dec NAME OF DATE OF DEATH NAME CECASED CHILD DEATH NAME rovide the following information on the NAME OF PARENT id the decedent have siblings?	DATE OF BIRTH	Yes : CHILD OF E	OF CHILD'S ER PARENT	omplete the in	informatic	
re any of the children listed in #5 dec NAME OF DATE OF SURV DEATH NAME rovide the following information on the NAME OF PARENT id the decedent have siblings? all siblings, including half or adopted.	DATE OF BIRTH eased?	Yes : CHILD OF E	OF CHILD'S ER PARENT No If yes, co	omplete the in	informatic	On below.
Provide the following information on the NAME OF PARENT Did the decedent have siblings? all siblings, including half or adopted.	IVING SPOUSE	CHILD OF D	EC'D CHILD'S NAM	1E, IS CHII	LD CH	ILD OF DEC'D CHILI
Provide the following information on the NAME OF PARENT Did the decedent have siblings? all siblings, including half or adopted.				*		
NAME OF PARENT Did the decedent have siblings? all siblings, including half or adopted.				1		
Did the decedent have siblings? all siblings, including half or adopted.						
all siblings, including half or adopted.	IS THIS PARE	ENT IF YE	ES, PROVIDE	CL	JRRENT A	ADDRESS
all siblings, including half or adopted.	DECEASED	D? DAI	E OF DEATH			
CURRENT ADDRESS	Yes Do not inclu	•	, complete the ings unless legally DECEASED? Y/N		OTHER	SIBLING FATHE NAME

		SIGNATURE OF AFFIANT	
STATE OF	§		
COUNTY OR PARISH OF	§ §		
SUBSCRIBED AND SWORN to by		(AFFIANT) before me this	day of

NOTARY PUBLIC

THE FACTS STATED IN THE AFFIDAVIT OF HEIRSHIP SHOULD BE SET FORTH IN SUCH A MANNER THAT IF THEY ARE FALSELY SWORN TO, THE AFFIANT MAY BE PROSECUTED AND CONVICTED OF PERJURY ACCORDINGLY. PHRASES SUCH AS "TO THE BEST OF AFFIANT'S KNOWLEDGE AND BELIEF" AND "I BELIEVE THE FACTS SET FORTH ABOVE TO BE TRUE AND CORRECT"

SHOULD NOT BE USED, AS THEY DO NOT MEET THE PERJURY TEST.

CORROBORATING AFFIDAVIT

STATE OF	§		
	§		
COUNTY OR PARISH OF	§		
information given in the above and foregoing a			
	,	, .	C
		SIGNATURE OF CORROBO	ORATING AFFIANT
SUBSCRIBED AND SWORN to before me this	day of		, 20
		NOTARY PUBLIC	