

SAMSON  
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## APPLICATION AND AUTHORIZATION FOR AUTOMATIC DIRECT DEPOSIT

SAMSON RESOURCES COMPANY \* SAMSON LONE STAR, LLC \* SAMSON CONTOUR ENERGY E&P, LLC  
(Collectively "SAMSON")

PLEASE COMPLETE A FORM FOR EACH OWNER NUMBER (please PRINT CLEARLY)

<b>OWNER NUMBER:</b>			
<b>OWNER NAME:</b> (Joint Name, if Applicable)			
<b>SOCIAL SECURITY OR TAX ID NUMBER:</b>			
<b>MAILING ADDRESS</b>			
<b>CITY, STATE, ZIP:</b>			
<b>PRIMARY PHONE NUMBER:</b>		<b>ALTERNATE PHONE NUMBER:</b>	
<b>EMAIL ADDRESS*:</b> *REQUIRED to receive direct deposit; see stipulation below			

- I hereby authorize Samson to deposit my royalty payments to the checking account and financial institution set forth below. Also, I hereby authorize the financial institution set forth below to deposit my royalty payments to my account. Samson will email me notification if and when a distribution has been made. I will have access to my revenue detail on the Samson Web site at [www.samson.com/ownerrelations](http://www.samson.com/ownerrelations) through a secure log-in procedure.
- Please deposit all of my royalty payments as follows:

**CHECKING ACCOUNT INFORMATION (Only One Account, Samson Will Not Split Distributions between Accounts)**

- Name of financial institution \_\_\_\_\_  
City & State \_\_\_\_\_  
Bank Routing No. \_\_\_\_\_ CHECKING Account # \_\_\_\_\_

- I UNDERSTAND THAT I MUST PROVIDE AN EMAIL ADDRESS FOR DEPOSIT NOTIFICATION TO RECEIVE MY PAYMENT BY DIRECT DEPOSIT**

This authorization is to remain in full force and effect until Samson has received written notification from me of its termination and in such manner as to permit Samson and the financial institution of my choice a reasonable opportunity (as determined in the sole discretion of Samson) to act upon my instructions.

Owner Name(s) (please print) \_\_\_\_\_

(Name as shown on your account – if joint account, both parties must be indicated and both signatures included.)

Date Signed \_\_\_\_\_

Signature as on your **Samson** account \_\_\_\_\_

Date Signed \_\_\_\_\_

Signature of **Joint Samson** account holder (if applicable) \_\_\_\_\_

**SAMSON MAY GRANT OR DENY PAYMENT BY DIRECT DEPOSIT AT ITS SOLE DISCRETION**

(Application will be denied if a voided check from the account listed above is not attached)

**ATTACH VOIDED CHECK HERE**