

Attn: ACH

600 BAILEY AVE, SUITE 150 FORT WORTH, TX 76107

## TEXLAND PETROLEUM, L.P. REVENUE PAYMENT

## **ACH Direct Deposit Authorization/Enrollment Form**

The undersigned hereby elects to participate in ACH direct deposit for all future revenue distributions.	
Owner Number:	Social Security # or Tax ID #:
Owner Name as Shown on Check Deta	ail:
Address:	
Daytime Telephone Number: ()	E-mail:
Name of Financial Institution:	
Address of Financial Institution:	
Bank Representative & Phone Numbe	r:
Name on Account:	
Checking Account Number:	
Bank Routing Number:	
the bank account specified above. I	d Petroleum, L.P. and my bank to electronically deposit my payment to understand that this authorization will remain in effect until I notify ges. Forms may be obtained by contacting Texland Petroleum at the
Signature:	Date:
PLEASE COMPLETE, SIGN, AND RETUR	N THIS FORM ALONG WITH A VOIDED CHECK.
US Mail: Texland Petroleum, L.P.	Scan and Email:  ACH@texpetro.com

PLEASE NOTIFY TEXLAND PETROLEUM IMMEDIATELY OF ANY CHANGES TO THIS FORM (BANK, ACCOUNT NUMBER, NAME, ETC.) THIS WILL AVOID ANY DELAYS IN THE MONTHLY DISTRIBUTION.

## TEXLAND PETROLEUM, L. P.

600 BAILEY AVE., SUITE 150 FORT WORTH, TEXAS 76107 PHONE (817) 336-2751

\_\_\_\_\_ I am unable to access the internet or email. Please continue to mail my monthly check detail.