

R. LACY SERVICES, LTD.

DIRECT DEPOSIT ENROLLMENT / CHANGE FORM

Name of Owner

Owner Number (on Check Detail)

(New Owner will be assigned Number- Leave blank)

Street Address or P. O. Box

Tax ID or Social Security Number

City

New Request: _____

Change Request: _____

State

Zip Code

Daytime Phone No.

Email Address :

(Required)

Name/Address of Financial Institution:

Routing Transit Number (9 digits):

Account Number:

Type of Account (Circle one):

Checking

Savings

Required: Attach a Voided check with Preprinted Name and Address Information. For Savings Acct - Provide Document from Financial Institution with above information & Account Name

The undersigned, hereinafter called "Owner", represents that it owns oil, gas, and/or mineral interest(s), the proceeds of which are currently distributed by either R. Lacy Services, Ltd. or Crain Energy, Ltd. (referred to as "Payor"). Owner authorizes Payor to remit future payments due Owner for its interest under the owner number and in accordance with the information shown above by Direct Deposit. Owner agrees that all affected agreements between Owner and Payor will be amended to allow Direct Deposit payments and to extend the date of transfer for Direct Deposit payments to three (3) calendar days beyond the date of the regular check issuance. Payor agrees not to remove funds from Owner's financial institution account.

Owner agrees to give Payor thirty (30) days advance written notice of any change in the payment instructions shown above. Owner agrees that Payor will not be liable for any interest or other claim arising as a result of Owner's failure to give such notice. Further, Owner hereby releases and agrees to indemnify and hold Payor harmless for any loss, claim, damage, or interest incurred as a result of Owner's financial institution's failure to properly or promptly post any such Direct Deposit. Owner also agrees that Payor may at any time discontinue payments by Direct Deposit.

NOTE: When properly executed, this authorization will become effective thirty (30) days after it is received by Payor. During the transition of your account to Direct Deposit, you will continue to receive your royalty checks by mail at your address on file.

Owner's Signature - REQUIRED FOR PROCESSING

Date

Joint Owner Signature, if applicable - REQUIRED FOR PROCESSING

Date

Return to: R. Lacy Services, Ltd.

P. O. Box 2146

Longview, TX 75606

jlacy@rlacy.com OR emaggard@rlacy.com

Fax Number : 903-758-5098

Telephone : 903-758-8276