INSTRUCTIONS FOR COMPLETING PROOF OF DEATH AND HEIRSHIP AFFIDAVIT

- 1. This form should be completed by someone other than an heir, who is familiar with the family history of the decedent, and who will obtain no benefit from the Estate. This person should be a disinterested (non-family member) party in a position to know the facts. All questions should be answered and current addresses, including the street address, city, state and zip code should be provided for each party listed on the Affidavit.
- 2. The person completing the form should read it carefully and answer the questions that are applicable, paying particular attention to the name(s) and address(es) of the heir(s), then sign in the first space provided for "Affiant" before a Notary Public.
- 3. Completed, fully executed and notarized Affidavit should be recorded in the county where the property is located. Vitruvian currently operates in Garvin, Grady, and Stephens counties, Oklahoma. The addresses for the County Clerk of each of those counties is:

County Clerk

101 S. 11th. Rm. 203

Duncan, OK 75333

Phone: 580-255-0977

Call for Recording Fee

Stephens County, Oklahoma

County Clerk Grady County, Oklahoma 326 West Choctaw St. Chickasha, OK 73023 Phone: 405-224-7388

Call for Recording Fee

County Clerk Garvin County, Oklahoma County Courthouse P.O. Box 926 Pauls Valley, OK 73075

Phone: 405-238-2772 Call for Recording Fee

4. Return fully completed, notarized, and recorded Affidavits of Heirship to Vitruvian at the address below:

Vitruvian II Woodford, LLC 4 Waterway Square Place Suite 400 The Woodlands, TX 77380

If you have any questions, please contact Vitruvian's owner relations department by phone at 832-458-3155 or by email at owner.relations@vexpl.com. Thank you for your assistance.

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AFFIDAVIT OF DEATH AND HEIRSHIP

ST	ATE OF								
CO	OUNTY OF								
INI	FORMATION CONCERNING:		(Deced	lent)					
I.		(affia	nt), whos	e address is:					
of l	lawful age, being first duly swo	rn acco	rding to la	aw, on oath says:					
1.	Name of Decedent								
3.	What was your relationship to t	he Dece	dent?						
4.	Date decedent died:		Where	e?					
5.	Did decedent leave a will?		If Dece	edent left a will, a	ttach a copy hereto.				
6.	Have probate proceedings com	menced?		If so, comple	te the following to th	e best of your knowledge:			
	Proceedings were commenced in:County, State of								
	Name and address of Executor	or Admi	nistrator: _						
7.	Were there any unpaid debts or obligations due by decedent at the time of death?								
	If so, give the following inform	ation:							
	To Whom Owing		Amount		Nature of Debt	Paid-Unpaid now			
8.	Was decedent surety on any box	nd at the	time of hi	s death?					
9.	Were there any suits pending, o	r judgme	ents rende	red in any court, ag	gainst decedent at the	e time of death?			
	If so, state briefly the nature, an	nount in	volved and	l parties to the acti	on:				
	·								
10.	Were decedent's minerals inherit	ted?		If no, date mineral	ls were acquired:				
11.	Was decedent married or single at time of death?								
	If married, to whom?			Date of marria	ge:				
	Living Spouse's Address:								
12.									
	If so, give the following inform	ation: (L	ist names	see address is: aw, on oath says: nswers to questions propounded, constitute a true, correct and complete ter named as "decedent" and of the estate of such decedent. re? edent left a will, attach a copy hereto. If so, complete the following to the best of your knowledge: County, State of t					
	Name of Spouse	Date T	erminated	Death or Divorce	Present A	ddress or Date of Death			

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15.	if decedent had any chi	Idren by a	ny person, or	ado	pieu ang	y chilaren,	give tr	he following information	1:
	Name of Child	Age	Living/Decea	ased		Present A	Addres	ss or Date of Death	Name of Other Parent
14.	If a deceased child left	descendan	ts, give the fo	ollov	ving inf	ormation:			
	Name of Decedent's Dec	ceased Chil	d (from questi	ion #	±13):				
	Spouse Name & Address:		ldren of sed Child		Age	Living/De	ceased	Present Addres	ss or Date of Death
	Name of Decedent's Dec	ceased Chil	d (from questi	ion #	±13):				
	Spouse Name & Address:	Children of Deceased Child			Age	Living/Deceased		Present Addres	ss or Date of Death
15.	In case decedent left n	ıo childrei	n or deceden	ts of	f deceas	sed childre	n, the	n please furnish the fo	llowing information:
	Name of		-	Age		g/Deceased		Present Address of	
	Give names of brother	s and siste	rs of deceder	nt:			l		
	Name of	Siblings	1	Age	Living	g/Deceased		Present Address of	or Date of Death
	Give names of children	n of decea	sed brother o	or sis	ster:				
	Name of Child			Child of			Age	Present Address	s or Date of Death

					Initials
16. l	Legal description	of the property owne	ed by the deceased (in	clude Section, To	wnship, Range and County(ies) and State:
					torney or agent for, deceased) which will sho
-	Date			A	ffiant Signature
De			, to me know	n to be the perso	, before me personally appeared on who executed the foregoing Affidavit of sher free act and deed.

NOTARY PUBLIC

Commission No.:

PLEASE ATTACH A COPY OF DEATH CERTIFICATE; IF THERE WAS A WILL, PLEASE ATTACH A COPY HERETO

My commission expires: