



Change of Name / Address Form

PLEASE ALLOW 6-8 WEEKS TO PROCESS THE REQUEST

To request changes related to your XTO owner number, please complete the form below. Mail or fax your completed form, with the appropriate documentation (marriage certificate, divorce decree, etc.) to:

XTO Energy Inc.
Attn: Division Orders
810 Houston Street
Ft Worth, TX 76102-6298
817.887.5836 Fax
1.866.886.2613 Interest Owner Relations

NAME CHANGE

Owner Number _____

Old Name (Last Name, First Name, Middle Name) _____

New Name (Last Name, First Name, Middle Name) _____

ADDRESS CHANGE

Name (Last Name, First Name, Middle Name) _____

Owner Number _____ Day Time Phone Number **(REQUIRED)** _____

OLD ADDRESS

City _____ State _____ Zip Code _____

NEW ADDRESS

City _____ State _____ Zip Code _____

Owner's Signature (REQUIRED) _____ **Date** _____ **Owner Last four of TIN or SS# (Required)** _____

2nd Owner's Signature (REQUIRED) _____ **Date** _____ **2nd Owner Last four of TIN or SS# (Required)** _____

NOTE: If More Than One Owner Name Appears on Account, BOTH OWNERS MUST SIGN

EMAIL
