



ADDRESS CHANGE AUTHORIZATION FORM

Please complete the below required information and return the completed form to Marathon Oil via mail, fax, or email. For your protection, address changes will not be accepted by telephone. All address change requests must include the owner's signature. If known, you are encouraged to provide your Owner Number and/or last four digits of your Social Security Number (SSN) or Tax Identification Number (TIN) for verification purposes.

Please allow up to 60 days for address changes. Address changes will be applied to all correspondence, royalties, rentals, and shut-in payments issued by Marathon Oil unless otherwise directed. If you have questions regarding your address change request, please contact our Owner Relations Center at (888) 522-8871 or OwnerRelations@marathonoil.com.

Owner Name: _____

Designation (Corporate Officer, Trustee, Executor, Power of Attorney, etc.): _____

Owner Number: _____

Confirm TIN or SSN (last 4 digits): _____

Phone Number: _____

E-mail Address: _____

NEW ADDRESS: _____

City: _____ State: _____ Zip: _____

I confirm the address below is my previous address.

OLD ADDRESS: _____

City: _____ State: _____ Zip: _____

I authorize Marathon Oil to change my address as directed.

Owner or Authorized Representative Signature (Required)

Date