

Change of Name/Address Form

Please complete the below change of name/address form to notify BKV Corporation and its subsidiaries and affiliates (collectively "BKV") that a change needs to be made to the owner information that we have on file. Notification in writing is required to make the appropriate changes. Please complete the required information and return to the address listed below.

Please note that for your protection, the last four digits of your social security number or federal tax ID number are being requested to verify your identity.

Owner Number:

Name 1:	Tax ID/SSN: XXX-XX-
Name 2:	Tax ID/SSN: XXX-XX -
Old Name / Address:	New Name / Address:

Please ensure all accounts holders sign and date below. When properly executed, you are hereby authorizing and directing all future notices and payments to be sent to the address listed in this completed form. The change of name/address will become effective within (30) days.

(Signature)	Date:
(Signature)	Date:

Please remit to:

bkvland@bkvcorp.com

or

BKV Corporation
ATTN: Land
1200 17th Street, Ste. 2100
Denver, CO 80202

