



INSTRUCTIONS FOR COMPLETING AFFIDAVIT OF HEIRSHIP

The purpose of an Affidavit of Heirship is to place the county records on notice for mineral owners that are deceased but had no probate of their estate. When a search is done, it will tell the title examiner that the mineral owner is deceased, and they need to contact the heirs. Affidavits of Heirships are a tool used by oil and gas companies to support a title change for small estates. **CIMA ENERGY, LP requires that all affidavits be placed on record in the county(s) where the property(s) are located. Please read the below instructions carefully.**

1. The person who fills out the form is referred to as the **“AFFIANT”**.
2. The deceased is referred to as the **“DECEDENT”**
3. **The Affiant must be someone other than an Heir.** The Affiant should be familiar with the family history of the Decedent. The affiant should be someone **who will obtain no benefit** from the Estate.
4. The Affiant should read carefully and answer all the questions that are applicable; paying attention to the name(s) and address(s) of the heir(s).
5. The Affiant must sign the Affidavit of Heirship in front of a Notary Public, so **it can be notarized**.
6. **The completed, signed and notarized form must be sent for recording to the county(s) where the property(s) are located.** Please contact the appropriate county/parish clerk to obtain fees and instructions. Contact information for the county/parish clerk can be found at: www.courthousedirect.com. If you cannot locate the information, please contact us for assistance.
7. A copy of the death certificate of the Decedent is required
8. A copy of the Decedent's will (if there was one) is required
9. Please send **copies** of the recorded forms to CIMA ENERGY, LP and **keep the original for your files**.
10. Transfer by Affidavit of Heirship is according to the state's law of Descent and Distribution where the property is located.

CIMA ENERGY, LP
DIVISION ORDERS
1221 McKinney St, Suite 3700
HOUSTON, TX 77010
EMAIL: divorder@cima-energy.com
PHONE: 713 209 1112 / FAX: 713 759 1186

I am aware of the penalties of perjury under Federal Law, which includes the execution of a false affidavit, pursuant to 18 U.S.C.S., Section 1621 wherein it is provided that anyone found guilty shall not be fined more than \$2,000 or imprisoned not more than 5 years or both. I am also aware that perjury in the execution of a false affidavit is a criminal act pursuant to Section 37.02 of the Texas Penal Code. Finally I am also aware that under Section 32.46 of the Texas Penal Code, a person commits an offense, if with intent to defraud or harm a person, he, by deception, causes another to sign or execute any document affecting property or service of the pecuniary interest of any person, and that an offense under such Section is a felony of the third degree which is punishable by a fine of \$5,000 and confinement in the Texas Department of Corrections for a term of not more than 10 years or less than 2 years.

AFFIDAVIT OF HEIRSHIP

(FILL IN ALL BLANKS)

| | |
|----------------------------|--|
| Lease or Unit No.(s) | |
| Description of Property(s) | |

STATE OF _____ §
COUNTY / PARISH OF _____ §

| | | | | | |
|--------------------|--|-----------------|--|------|--|
| NAME OF DECEDENT: | | DATE OF DEATH: | | AGE: | |
| DECEDENT'S ADDRESS | | CITY/STATE/ZIP: | | | |

AFFIANT'S Name: _____ and address is: _____
[Name of person filling out form (cannot be an heir of the deceased)] (Street Number & Name)

_____, _____, _____ and my phone/email is _____
City, State Zip

I am of lawful age and being duly sworn, upon oath, deposes and say that I was well acquainted, ***but not an heir*** of the deceased:
_____, hereinafter referred to as "the Decedent," and that the answers and statements
(Name of the deceased)

given in the following questionnaire are based upon the Affiant's personal knowledge and are true and correct:

- How long did you know the Decedent? Years _____ Whole Life _____ Other _____
- What was your relationship to the Decedent? _____
- Did the Decedent leave a will? Yes _____ No _____ I don't know _____ If yes, attach a copy of the will to this affidavit.
- Have any proceedings been commenced with respect to the Decedent's estate? Yes _____ No _____
If yes, complete the following to the best of your knowledge: Proceedings were commenced in _____
County, State
and the administrator is _____, residing at: _____
Administrator's Name Administrator's Address:
- Are there any debts still owing by the Decedent's estate? Yes _____ No _____ If yes, will the size of the estate be sufficient in your opinion to pay such debts? Yes _____ No _____
- Have all Federal Estate and State Inheritance taxes been paid? (If none due, so state.) _____

7. Was the interest in the above described property community or separate? _____
8. Was the property of the deceased as described on this affidavit a homestead? _____
9. At the time of death was the Decedent Single____ Married____ Divorced____ Widow____ Widower____
10. If married, what was the Decedent’s surviving spouse’s name? _____
11. If the Decedent was married at the time of death, what is the date of marriage, surviving spouse’s present address or, if deceased, when did such surviving spouse die? _____
Date of Marriage Address or Date of Death
12. How many times was the Decedent married? None _____ or _____ time(s).
13. If one or more former spouses is deceased or divorced, state name, when and where such death or divorce occurred. If deceased, specify whether or not married to Decedent at the time of death.

| Name of Former Spouse | Date of Death | Date of Divorce | Place of Death or Place of Divorce | If deceased, were they married to Decedent at time of death? |
|-----------------------|---------------|-----------------|------------------------------------|--------------------------------------------------------------|
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| | | | | |
| | | | | |

14. What is the total number of Decedent’s children, both natural and adopted by any spouse? _____
Complete the following table with respect to all children of the Decedent, whether living or deceased:

| Name of Child | Age of Child | Natural or Adopted | Date of Birth or Adoption | Mailing Address or Date of Death | Name of Child’s other Parent |
|---------------|--------------|--------------------|---------------------------|----------------------------------|------------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

15. Complete the following table with respect to all children of every deceased child (if any) of the Decedent.

| Name of Decedent’s Deceased Children | Children of Deceased Child | Date of Birth | Mailing Address or Date of Death |
|--------------------------------------|----------------------------|---------------|----------------------------------|
| | | | |
| | | | |
| | | | |

16. If the Decedent was not survived by any children or grandchildren, then give below the names and addresses of the Decedent’s father, mother, and all brother and sisters.

| Name of Relative | Relationship | Age | Present Address or Date of Death |
|------------------|--------------|-----|----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

17. If the Decedent was not survived by any children, grandchildren, father, mother, brothers or sisters, then give the names and addresses of the nearest living relatives:

| Relative(s) Name | Relationship | Age | Present Address |
|------------------|--------------|-----|-----------------|
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| | | | |
| | | | |

18. Additional Remarks:

ACKNOWLEDGEMENT

AFFIANT: _____
Signature *Printed Name*

AFFIANT’s PHONE/ EMAIL: _____ / _____

WITNESS: _____
Signature *Printed Name*

Subscribed and sworn to be this _____ day of _____, 20____.
(month) (yr)

_____ Notary Public Signature
_____ Notary Public Printed Name *(Notary seal)*

My Commission expires: _____, 20____