CONCHO

REVENUE CHECK REPLACEMENT REQUEST

Date: _____

From: _____   **Owner Number:** _____
  Owner Name (As it appears on check)

Subject: Stop Payment/Void to Reissue Checks

Please place a Stop Payment on the checks listed and re-issue:

Check #:	Date:	Amount:

Reason for reissue:

_____ **Check was lost**

_____ **Check was never received**

_____ **Stale Dated (Over 90 days after date issued)**

_____ **Other (Please explain)**_____

By signing below, I agree not to present for deposit or otherwise cause the above check(s) to be negotiable. If the check(s) is inadvertently found and deposited, I agree to repay COG Operating, LLC the check(s) amount plus handling costs, or if applicable, it may be offset from future revenue payments. If at some future date the original check(s) is found, I will return it to the address below.

COG Operating, LLC
Attn: Concho Owner Relations Group 2FC-12
One Concho Center
600 W. Illinois Avenue
Midland, TX 79701
Email: ownerrelations@concho.com
Toll Free#: 877.201.5449 Phone:432-685-2500

Signature: _____

Printed Name: _____   **Date:** _____