



Change of Name / Address Form
PLEASE ALLOW 4-6 WEEKS TO PROCESS THE REQUEST

To request changes related to your XTO owner number, please complete the form below. Return your completed form to XTO Energy in one of the following three ways:

Mail

XTO Energy Inc.
Attn: Division Orders
LOC 116
22777 Springwoods Village Pkwy
Spring, TX 77389

Fax 817 887 5836

Email: XTO-DO-BA-SM@XTOENERGY.COM (scan and attach as a PDF)

NAME CHANGE Complete form and return with the appropriate documentation (marriage certificate, divorce decree, etc.)

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

NOTE: If more than one owner is listed on the account, **BOTH PARTIES MUST SIGN, DATE,** and include **THE LAST 4 DIGITS OF SOCIAL SECURITY or TIN NUMBERS** as listed on the account.

Owner's Signature (REQUIRED)

Date

Owner Last four of TIN or SS#

2nd Owner's Signature (REQUIRED)

Date

2nd Owner Last four of TIN or SS#

EMAIL
