

AFFIDAVIT OF HEIRSHIP

(Owner Name)

PROPERTY(IES) INVOLVED:

Shell Lease Numbers & Names:

Legal Description of Lease:

I, _____, residing at _____, _____
(Name) (Address) (City)

_____ being first duly sworn, on oath, deposes and says that the answers and other statements hereinafter set out
(State)

are true and correct.

1. How long and how well were you acquainted with decedent? _____

2. If related to decedent, state in what way. _____

3. When and where did decedent die? _____

4. How old was decedent at time of death? _____

5. So far as you know, was decedent of sound mind at time of death and during his/her entire life? _____

6. Was decedent (circle one): married, widowed, divorced or single (never married) at time of death?

7. If married, give name and address of surviving husband or wife _____
(Name)

(Address) (City) (State)

8. If widowed, please attach a copy of deceased spouse's death certificate.

9. How many times was decedent married? _____. If married more than once, give names of prior spouses, indicating whether marriage was terminated by death or divorce, and giving date of termination of marriage and address of each former spouse now living.

Name Of Former Spouse	Marriage Terminated By Death Or Divorce	Date Of Termination	Address If Living

16. If decedent left no surviving spouse or child or descendants of a child, then list names of decedent's parents and brothers and sisters and give information called for in the following tables. If half brother or sister, state whether maternal or paternal.

	Name	Age	Mailing Address	Living or Deceased	If Deceased Give Date
Father					
Mother					
Sibling (Brother/Sister)					
Sibling (Brother/Sister)					
Sibling (Brother/Sister)					

17. Descendants of deceased brother(s) and/or sister(s). If none, state so.

Name of Deceased Sibling	Descendants	Age	Mailing Address	Living or Deceased	If Deceased Give Date

18. If decedent left no children or their descendants, father or mother, brother(s) and/or sister(s), or their descendants, then give the information called for in the following tables.

	Name	Age	Mailing Address	Living or Deceased	If Deceased Give Date
Paternal Grandfather					
Paternal Grandmother					
Maternal Grandfather					
Maternal Grandmother					

Name	Uncle Or Aunt	Age	Paternal Or Maternal	Mailing Address	Living or Deceased	If Deceased Give Date

Name Of Deceased Uncle Or Aunt	Descendants	Age	Mailing Address	Living or Deceased	If Deceased Give Date

[Signature Blocks Appear on Following Page]

Signature Page for that certain Affidavit of Heirship
regarding _____ dated _____

(SIGNATURE)

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 201__.

(NOTARY PUBLIC)

MY COMMISSION EXPIRES: _____

CORROBORATING AFFIDAVIT

I, _____, of lawful age, being first duly sworn, upon his/her oath states: That the information given in the above and foregoing affidavit is true, and accurate, to the personal knowledge of this affiant.

(SIGNATURE)

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 201__.

(NOTARY PUBLIC)

MY COMMISSION EXPIRES: _____