

**EXECUTION PAGE AND POWER OF ATTORNEY**  
**JOINT VENTURE PARTNERSHIP AGREEMENT**  
**OF**  
**Gaddis Farms 13-13 #1 Production Joint Venture**

The undersigned acknowledges that he or she has received a copy of the Joint Venture Partnership Agreement and the Confidential Information Memorandum to which such Agreement is attached as an exhibit and has read and understands same and the restrictions of the Joint Venture Partnership Agreement including, but not limited to the right of the Managing Venturer to make certain assessments and the restrictions on transfer of Venturer's partnership interests in the Joint Venture (Units), all as set forth in the Joint Venture Partnership Agreement, and to the same extent and effect as if the undersigned executed the original of the Joint Venture Partnership Agreement.

In addition and by his or her execution hereof, the undersigned hereby constitutes and appoints National Oil Projects, LLC, in its capacity as Managing Venturer of the captioned joint venture, and/or any duly authorized officer thereof with full power of substitution in the premises, as his true and lawful attorney-in-fact, for him and in his name, place, and stead and for his use and benefit to attach this EXECUTION PAGE AND POWER OF ATTORNEY to the Joint Venture Agreement and to execute, acknowledge, swear to, certify, verify, deliver, record, file and publish as necessary:

(1) Any certificate, document or instrument as may be required, necessary or desirable under the laws of the State of Texas or the laws of any other state in which the captioned Joint Venture may be qualified, reformed or conducting business; and

(2) All instruments that reflect a change in the Joint Venture or change in, or amendment to this Agreement by a Vote of the Venturers.

The undersigned further authorizes such attorney-in-fact to take any further action that such attorney-in-fact considers necessary or advisable in connection with any of the foregoing, hereby giving such attorney-in-fact full power and authority to do and perform each and every actor thing whatsoever requisite or advisable to be done in and about the foregoing as fully and to the same extent as such Venturer might or could do if personally present, hereby ratifying and confirming all that such attorney-in-fact shall lawfully do or cause to be done by virtue hereof; provided, that in no event may the Managing Venturer utilize this power of attorney to cast any vote or consent of the undersigned as to the matters with respect to which the Venturers are entitled to Vote under the terms of this Agreement or by law.

The undersigned hereby agrees to be bound by any representations made by the Managing Venturer acting in good faith pursuant to such power of attorney; and hereby waives any and all defenses, which may be available to contest, negate, or disaffirm the action of the Managing Venturer taken in good faith under such power of attorney.

The undersigned has and does hereby agree to execute any and all additional forms, documents or instruments as may be reasonably necessary or required by the Managing Venturer to evidence this power of attorney.

This power of attorney shall be deemed coupled with an interest and shall survive the death or disability of the undersigned, or the assignment or transfer of the undersigned's interest in the Joint Venture, until the transferee(s) or assignee(s) shall become a Substitute Venturer as required by the Joint Venture Agreement, or shall have otherwise executed such instrument(s) as the Managing Venturer reasonably deems to be necessary to bind such transferee(s) or assignee(s) under the terms of the Joint Venture Agreement, as from time to time amended, and the terms of this power of attorney.

IN WITNESS WHEREOF, the undersigned has executed this EXECUTION PAGE AND POWER OF ATTORNEY as of the \_\_\_\_ day of \_\_\_\_\_, 2024 at \_\_\_\_\_, \_\_\_\_\_.

VENTURER:

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Name Printed or Typed)

\_\_\_\_\_  
Business or Entity

Preferred Mailing Address  
If other than Residence:

\_\_\_\_\_  
\_\_\_\_\_

Address:

\_\_\_\_\_  
\_\_\_\_\_

Social Security (or Tax I.D.) Number:

\_\_\_\_\_

THE STATE OF \_\_\_\_\_ §

COUNTY OF \_\_\_\_\_ §

BEFORE ME, the undersigned authority, on this day personally appeared \_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

(S E A L)

\_\_\_\_\_  
Notary Public in and for the State of \_\_\_\_\_

My Commission Expires:

Printed or Stamped Name: