

Odyssey Trust Company -1230 – 300 5th Avenue SW Calgary, AB T2P 3C4

Upload and submit your completed form via www.odysseycontact.com

Re: Whitecap Resources Inc. - Dividend Direct Deposit Authorization

This authorizes Odyssey Trust Company ("Odyssey"), as disbursing agent for Whitecap Resources Inc., to send payments electronically or by any such other commercially acceptable method, to my (our) account indicated below (the "Account"). This authorizes the financial institution holding the Account to post all such entries. This authority is to remain in effect until I (we) provide written authorization to terminate the direct deposit service, or until this service is terminated by the Issuer or Odyssey. Written notices of termination of the direct deposit service must be received by Odyssey at least 5 business days prior to the applicable record date for a future payment.

This section must be completed for your instructions to be executed:

NAME(S) IN WHICH SECURITIES ARE REGISTERED (PLEASE PRINT)		SECURITY HOLDER NUMBER		NEW
				CHANGE
ADDRESS				SUITE
CITY	PROVINCE / STATE	POSTAL/ZIP CODE	COUNTRY	

Please provide a cheque marked void or a letter from your financial institution to deposit payments into a chequing account. If you do not have a cheque available, please complete the following info:

NAME(S) OF ACCOUNT (MUST BE THE SAME AS SECURITY REGISTRATION)								
INSTITUTION NO.		BRANCH NO.		ACCOUNT NO.				
BRANCH ADDRESS								
CITY	PROVINCE / STATE		POSTAL/ZIP CODE		COUNTRY			

Authorized Signature(s):

I (We) authorize you to act in accordance with my (our) instructions set out above. I (We) acknowledge that these instructions supersede all previous instructions in respect of my/our holdings.

Signature

Signature

Date

Date

PRIVACY NOTICE: At Odyssey Trust Company, we take your privacy seriously. When providing services to you, we receive non- public, personal information about you. We receive this information through transactions we perform for you or an issuer in which you hold securities, from enrollment forms and through other communications with you. We may also receive information about you by virtue of your transactions with affiliates of Odyssey Trust Company or other parties. This information may include your name, social insurance number, securities ownership information and other financial information. With respect to both current and former customers, Odyssey Trust Company does not share non-public personal information with any non-affiliated third party except as necessary to process a transaction, service your account or as permitted by law. Our affiliates and outside service providers with whom we share information are legally bound not to disclose the information in any manner, unless permitted by law or other governmental process. We strive to restrict access to your personal information to those employees who need to know the information to provide our services to you, and we maintain physical, electronic and procedural safeguards to protect your personal information. Odyssey Trust Company realizes that you entrust us with confidential personal and financial information and we take that trust very seriously. By providing your personal information to us and signing this form, we will assume, unless we hear from you to the contrary, that you have consented and are consenting to this use and disclosure. A complete copy of our Privacy Code, may be accessed at www.odysseytrust.com, or you may request a copy in writing Attn: Chief Privacy Officer, Odyssey Trust Company at 350 – 409 Granville Street, Vancouver, BC, V6C 1T2.