

DISTRIBUTION REINVESTMENT PLAN
OPTIONAL CASH PAYMENT AUTHORIZATION FORM

TO: EnerVest Energy and Oil Sands Total Return Trust (Cusip: 29276F102)

AND TO: Computershare Trust Company of Canada (the "Plan Agent")

ALL DISTRIBUTIONS WILL BE PAID BY CERTIFIED CHEQUE AND NO ADDITIONAL UNITS WILL BE ISSUED TO YOU UNLESS AN AUTHORIZATION FORM IS RECEIVED BY THE PLAN AGENT.

We hereby confirm that, in conjunction with submitting this form, the number of Units noted below have been delivered, using CDS book-based system, to the Plan Agent's account designated specifically for participants of the distribution reinvestment plan of EnerVest (the "Plan").

We elect to participate in the Plan to the extent and for and on behalf of the Unitholder or Unitholders noted below. We hereby instruct CDS to direct the Plan Agent to invest all amounts payable in respect of the distributions on the Units in the purchase of additional Units, commencing with the next distribution paid after this completed form has been received and recorded as provided under the Plan. We understand that participation in the Plan is subject to the terms of the Plan documents, which we have received and read.

We represent and warrant that the Unitholder or Unitholders noted below are residents of Canada. We undertake to notify you immediately if the Unitholder or Unitholders noted below cease to be residents of Canada.

We understand that in order for this Optional Cash Payment to be effective for the next distribution, such notice must be received by the Plan Agent at least five Business Days prior to the distribution payment date relating to such distribution.

Capitalized terms used in this Authorization Form that are not defined shall have the respective meanings ascribed to them in the Plan.

CDS Participant's Name; FINS#; CUID#:

CDS Participant Authorized Signature:

Total Units submitted for DRIP to CDS with this Authorization Form:

Contact Name:

Total amount of OCP submitted for DRIP to the Plan Agent with this Authorization form:

Phone Number:

RETURN FORM AND CERTIFIED CHEQUE TO:

COMPUTERSHARE TRUST COMPANY OF CANADA
Attention: Dividend Reinvestment Department

Via hand delivery at:
100 University Avenue, 9th Floor Counter or

By Courier to:
88A East Beaver Creek, Unit 2, Richmond Hill, Ontario L4B 4A8

A copy of this form must also be faxed to: (905) 771-4417 (Please note: This fax # will only accept this form. Computershare will not be liable to act upon any other documents received.)