



EMPLOYEE BENEFITS

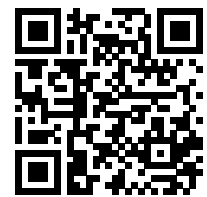
2021 - 2022

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Employees, please reference separate booklet for all legal notices.

In this Guide, we use the term company to refer to Select Energy Services, LLC. This Guide is intended to describe the eligibility requirements, enrollment procedures and coverage effective dates for the benefits offered by the company. It is not a legal plan document and does not imply a guarantee of employment or a continuation of benefits. While this Guide is a tool to answer most of your questions, full details of the plans are contained in the Summary Plan Descriptions (SPDs), which govern each plan's operation. Whenever an interpretation of a plan benefit is necessary, the actual plan documents will be used.



Info on the Go!

Scan with Your Smartphone to Access Enrollment Materials Online Anytime.

ABOUT US

Select Energy Services, Inc., is made up of two divisions working together to bring outstanding service to our customers. As one team, we have the agility, resources and most importantly the people, to get the jobs done unlike any of our competitors. Together we are able to provide two divisions of service:

Water Services and Infrastructure: Our Water business, operating primarily under Select Energy Services, LLC, is a leading provider of total water solutions to customers that include major integrated oil companies and independent oil and gas producers. Water Services also includes Peak Oilfield Services, LLC, which provides work-force accommodations and surface rental equipment supporting drilling, completion and production operations to the U.S. onshore oil and gas industry, and Tidal Logistics, which provides storage, trucking and transfer logistic services for oilfields in Colorado, Texas, and Louisiana.

Oilfield Chemicals. Our oilfield chemicals team operates under Rockwater Energy Solutions, and is a technology leader in the development, manufacturing and supply of completion, production and specialty chemicals to the upstream oilfield services industry.



Dear Fellow Employee,

At Select Energy Services, it is the dedication and hard work of our employees in each of our divisions that makes this company successful. I am proud to be a part of this team, now more than 2,000 strong. It is truly impressive what can be achieved with the talents of our innovative, experienced and hard-working employees.

Working safely with a sincere dedication to excellence requires a great deal of focus. That focus can't be achieved with the distraction and worry concerning the health and security of our families. To that end, we are committed to providing competitive and comprehensive benefit programs as an investment in our employees and their families.

We understand that selecting benefits consistent with your lifestyle, family needs and finances is a very important task. I encourage you to understand each of the benefits alternatives so you can choose the coverage that works for you. Since benefits are an important part of your total compensation, please take the time to carefully review all of the benefits information provided and choose the options that are right for you and your family. It is the best way to ensure that you are getting the most value from our benefits program.

Thank you for your hard work, dedication and commitment to excellence you bring to each and every job or project. We continue to be a leader in the oil and gas services industry because of the accomplishments of our employees and the support of their families.

Sincerely,

John Schmitz
President & Chief Executive Officer



ELIGIBILITY & ENROLLMENT

ELIGIBILITY

If you are a full-time employee of Select Energy Services, you are eligible to participate in the medical, dental, vision, life and disability plans and additional benefits.

WHEN DOES COVERAGE BEGIN?

Open Enrollment - Your elections are effective on June 1, 2021 and will remain until December 31, 2021. New Hire - Your elections are effective the first of the month coinciding or following 60 days of employment. You are not eligible to change your benefits until the next enrollment period unless you experience a qualifying life event. The current plan year ends December 31, 2021.

ESPP and 401(k)

- Employee Stock Purchase Plan is available after 1 year of employment.
- You are eligible for the 401(k) from your first day of employment.

ELIGIBLE DEPENDENTS

Dependents eligible for coverage in the Select Energy Services benefits plans include:

- Your legal spouse (or common-law spouse where recognized).
- Children up to age 26 (includes birth children, stepchildren, legally adopted children, children placed for adoption, foster children and children for whom legal guardianship has been awarded to you or your spouse).
- Dependent children 26 or more years old, unmarried and primarily supported by you and incapable of self-sustaining employment by reason of mental or physical disability which arose while the child was covered as a dependent under this plan (periodic certification may be required).

Please note that Select Energy Services requires employees enrolling dependents for the first time to submit documentation and Social Security numbers to substantiate their eligibility (ex. marriage certificate or affidavit for a spouse; birth certificates for any children).

Log in to enroll

You will be able to make your elections or changes online through Dayforce at www.dayforcehcm.com. If you have not logged in to Dayforce before, enter:

- Company name: select
- Username: **Your six-digit employee ID number**
- Initial password: **Your year of birth, plus the word Login, ex. 1983Login**

Once you log in, you will set up your own password. Select Employee and then click the Benefits icon at the top of the page. Click **Overview** and then **Pending Enrollment** and follow the prompts.

MEDICAL BENEFITS

Medical benefits are provided through Blue Cross Blue Shield of Texas. Choose the plan that works best for your life. Consider the physician networks, premiums and out-of-pocket costs for each plan. Keep in mind your choice is effective from June 1, 2021 - December 31, 2021, unless you have a qualifying life event.

MEDICAL PLAN SUMMARY

	CHOICE HDHP		BASE PPO		BUY-UP PPO	
ANNUAL DEDUCTIBLE						
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Individual	\$1,500	\$4,500	\$4,000	\$12,000	\$1,000	\$3,000
Family	\$3,000	\$9,000	\$8,000	\$24,000	\$2,000	\$6,000
Coinsurance (Plan Pays)	20%*	50%*	20%*	50%*	20%*	40%*
ANNUAL OUT-OF-POCKET MAXIMUM (MAXIMUM DOES NOT INCLUDE DEDUCTIBLE)						
Individual	\$5,000	\$15,000	\$7,500	\$22,500	\$4,000	\$12,000
Family	\$10,000	\$30,000	\$15,000	\$45,000	\$8,000	\$24,000
COPAYS/COINSURANCE						
Preventive Care	100% covered	50% covered	100% covered	50% covered	100% covered	60% covered
Primary Care	20%*	50%*	\$40/\$60 copay	50%*	\$30 copay	40%*
Specialist Services	\$0*	N/A	\$0*	N/A	\$0*	N/A
Urgent Care	20%*	50%*	\$60 copay	50%*	\$45 copay	40%*
Diagnostic Care	20%*	20%*	\$350 copay (waived if admitted)	\$350 copay (waived if admitted)	\$250 copay (waived if admitted)	\$250 copay (waived if admitted)
Emergency Room	20%*	50%*	20% after \$350 copay (waived if admitted)	50% after \$350 copay and deductible (waived if admitted)	20% after \$250 copay (waived if admitted)	40% after \$250 copay and deductible (waived if admitted)

*After Deductible

MEDICAL PREMIUMS

	CHOICE HDHP	BASE PPO	BUY-UP PPO
BI-WEEKLY CONTRIBUTIONS			
Employee Only	\$50.00	\$65.00	\$105.00
Employee + Spouse	\$130.00	\$150.00	\$265.00
Employee + Child(ren)	\$110.00	\$135.00	\$225.00
Employee + Family	\$190.00	\$275.00	\$400.00

Select Energy Service Benefits Department

844-312-7424 | 1820 N I-35 Gainesville, TX 76240

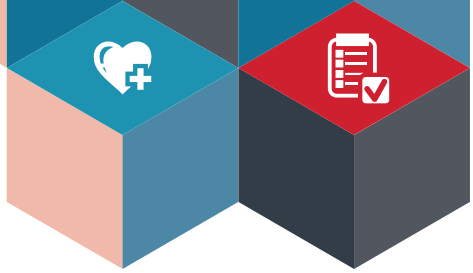
MEDICAL

Blue Cross Blue Shield of Texas
800-521-2227 | www.bcbstx.com

Choice HDHP Group #: 293023 Base PPO Group #: 293024 Buy-up PPO Group #: 293025

 BlueCross BlueShield of Texas
Experience. Wellness. Everywhere.™

PHARMACY BENEFITS



Our Prescription Drug Program is coordinated through Blue Cross Blue Shield of Texas. That means you will only have one ID card for both medical care and prescriptions.

	CHOICE HDHP		BASE PPO		BUY-UP PPO	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
RETAIL RX (30-DAY SUPPLY)						
Generic	20%*	20%*	\$10 copay	40% plus copay	\$10 copay	40% plus copay
Preferred Brand Name	20%*	20%*	\$50 copay	40% plus copay	\$40 copay	40% plus copay
Non-Preferred Brand Name / Preferred Specialty Drug	20%*	20%*	\$100 copay	40% plus copay	\$80 copay	40% plus copay
Non-Preferred Specialty Drug	20%*	20%*	10% up to \$250 max	40% plus copay	10% up to \$250 max	40% plus copay
MAIL ORDER RX (90-DAY SUPPLY)						
Generic	20%*	20%*	\$30 copay	40% plus copay	\$30 copay	40% plus copay
Preferred Brand Name	20%*	20%*	\$150 copay	40% plus copay	\$120 copay	40% plus copay
Non-Preferred Brand Name / Preferred Specialty Drug	20%*	20%*	\$300 copay	40% plus copay	\$240 copay	40% plus copay

*After Deductible

GENERIC DRUGS

Looking to save money on medication costs? You've most likely heard that generic prescription drugs are a more affordable option, so here's the skinny: Generic drugs are versions of brand-name drugs with the exact same dosage, intended use, side effects, route of administration, risks, safety and strength. Because they are the same medicine, generic drugs are just as effective as brand-name drugs and undergo the same rigid FDA standards. But on average, a generic version costs 80% to 85% less than the brand-name equivalent.

OUT-OF-POCKET COSTS	
DEDUCTIBLE The amount you must pay for covered services before your insurance starts paying its portion.	COPAY The fixed amount you pay for healthcare services at the time you receive them. Note: Copays apply to the Buy-Up and Base PPO plans. There are no copays on the Choice HDHP.
COINSURANCE Your percentage of the cost of a covered service. If your office visit is \$100 and your coinsurance is 20% (and you've met your deductible but not your out of pocket maximum), your payment would be \$20.	OUT-OF-POCKET MAXIMUM The most you will pay during the plan year before your insurance begins to pay 100% of the allowed amount.

PHARMACY
BCBSTX | 877-794-3574 | www.myprime.com

WHERE TO GO FOR CARE

PRIMARY CARE CENTER

When would I use this?
You need routine care or treatment for a current health issue.

What type of care would they provide?*

- Routine checkups
- Immunizations
- Often requires a copay and/or coinsurance
- Normally requires an appointment

NURSELINE

When would I use this?
You need care for minor illnesses and ailments, but would prefer not to leave home. These services are available by phone and online (via webcam).

What type of care would they provide?*

- Cold & flu symptoms
- Allergies
- Bronchitis
- Access to care is usually immediate.
- Some states may not allow for prescriptions through telemedicine or virtual visits.

TELEMEDICINE

When would I use this?
You need a quick answer to a health issue.

What type of care would they provide?*

Answers to questions regarding:

- Symptoms
- Medications and side effects
- Self-care home treatments
- When to seek care
- Nurse lines are usually available 24 hours a day, 7 days a week.

URGENT CARE CENTER

When would I use this?
You need care quickly, but it is not a true emergency.

What type of care would they provide?*

- Strains, sprains
- Minor broken bones
- Minor infections
- Minor burns
- Walk-in patients welcome

DO YOUR HOMEWORK

What may seem like an urgent care center could actually be a standalone ER.

EMERGENCY ROOM

When would I use this?
You need immediate treatment for a serious life-threatening condition.

What type of care would they provide?*

- Heavy bleeding
- Chest pain
- Major burns
- Broken bones

VIRTUAL MEDICINE

When you're sick, the last thing you want to do is leave the cozy comfort of your home. Or sometimes you're just too on the go to pop in for a visit. Virtual medicine is a convenient and easy way to talk to a doctor fast.

TELEMEDICINE

We provide a telemedicine benefit through MDLive to you and your dependents. MDLive offers on-demand access to board-certified doctors through online video, telephone or secure email. You and your family can be treated for general health issues at home. Telemedicine is useful for after-hours non-emergency care, when your primary care doctor is unavailable, if you need prescriptions or refills or if you're traveling. Please note that some states do not allow physicians to prescribe medications via telemedicine. For more information, visit www.MDLIVE.com/BCBSTX.

This program is **FREE** for those enrolled in the PPO plans and **FREE** for those enrolled in the Choice HDHP plan after satisfying the plan deductible. MDLIVE doctors or therapists can help treat the following conditions and more:

- Cold & flu
- Bronchitis
- Urinary tract infection
- Respiratory infection
- Sinus problems

TELEMEDICINE
MDLive | 888-680-8646 | www.MDLIVE.com/BCBSTX



ACCESS VIRTUAL VISITS

Visit www.MDLIVE.com/BCBSTX to request a virtual visit. Once you register and request a consult, you will pay your applicable portion of the service costs according to your medical plan, and then enter a virtual waiting room. During your visit you can talk to a doctor about your health concerns, symptoms and treatment options.

Virtual visits aren't good for conditions requiring an exam or test, complex or chronic problems, or emergencies, including sprains or broken bones.

HEALTH SAVINGS ACCOUNTS (HSA)

Your HSA can be used for qualified expenses for you, your spouse and/or tax dependent(s), even if they are not covered by your plan. If you are not currently enrolled in a HDHP but you have unused HSA funds from a previous account, those funds can still be used for qualified expenses.

Optum Bank will issue you a debit card, giving you direct access to your account balance. Use your debit card to pay for qualified medical expenses, with no need to submit receipts for reimbursement. You must have a balance in your HSA account to use the card.

For Eligible Expenses, check out IRS Publication 502 on www.irs.gov for a complete list.

ELIGIBILITY

You are eligible to contribute to an HSA if:

- You are enrolled in the Choice HDHP Health Plan.
- You are not covered by your spouse's non-HDHP health plan.
- Your spouse does not have a healthcare Flexible Spending Account or Health Reimbursement Account.
- You are not eligible to be claimed as a dependent on someone else's tax return.
- You are not enrolled in Medicare or TRICARE.
- You have not received Department of Veterans Affairs medical benefits in the past 90 days for non-service-related care. (Service-related care will not be taken into consideration.)

YOUR MONEY. YOUR ACCOUNT.

Your HSA is a personal bank account that you own and administer. It's up to you how much you contribute, when to use the money for medical services, and when to reimburse yourself. You can save and roll over HSA funds to the next year if you don't spend them all in the calendar year. You can even let funds accumulate year-over-year to use in retirement. HSA funds are also portable if you change plans. There are no vesting requirements or forfeiture provisions.

HOW TO ENROLL

To enroll in the company-sponsored HSA, you must elect the Choice HDHP with Select Energy Services. Complete all HSA enrollment materials and designate the amount to contribute on a pre-tax basis. Select Energy Services will establish an HSA account in your name and send in your contribution once bank account information has been provided and verified.

HEALTH SAVINGS ACCOUNT
Optum Bank | 800-243-5543 | www.optumbank.com



HSA FUNDING LIMITS

The IRS places an annual limit on the maximum amount that can be contributed to HSAs. For 2021, contributions (which include any employer contribution) are limited to the following:

HSA FUNDING LIMITS	
EMPLOYEE	\$3,600
FAMILY	\$7,200
CATCH-UP CONTRIBUTION (AGES 55+)	\$1,000
EMPLOYER HSA CONTRIBUTION	
EMPLOYEE	\$1,000
SPOUSE, CHILDREN OR BOTH	\$1,250

Select Energy Services provides an HSA employer contribution. Once you set up your HSA, and it is confirmed, the company will make an initial deposit of \$500 (employee only) and \$750 (employee + spouse, children, or family) in your HSA and contribute \$20/per paycheck up to the maximums listed above.

NOTE FOR CURRENT PARTICIPANTS

Since Select Energy Services will have a shortened plan year (June 1 - December 31), please ensure that your full HSA contributions for 2021 do not exceed the IRS limits for 2021. This will include contributions from the end of the current plan year (Jan - May) and the upcoming plan year (June - Dec).

FLEXIBLE SPENDING ACCOUNT

Flex your spending power! A Flexible Spending Account (FSA) is a special tax-free account you put money into to pay for certain out-of-pocket expenses.

HEALTHCARE FLEXIBLE SPENDING ACCOUNT

Contribute up to \$2,750 annually to use towards qualified medical expenses. Pay for eligible expenses with an FSA debit card at the same time you receive them without waiting for reimbursement.

Roll over up to \$500 in unused funds each year. You forfeit any additional funds, so estimate carefully. The Healthcare FSA is available to all employees except those enrolled in the Choice HDHP.

DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT

Contribute up to \$5,000 annually to use towards expenses associated with caring for elderly or child dependents. Dependent Care reimbursements are limited to the total amount that is deposited in your account at that time.

Eligible dependents include children under 13 and a spouse or other individual who is physically or mentally incapable of self-care and has the principal place of residence as the employee for more than half the year.

This account covers dependent day care expenses that are necessary for you and your spouse to work or attend school full time. Examples of eligible dependent care expenses include:

- In-home babysitting services (not provided by a tax dependent)
- Care of a preschool child by a licensed nursery or day care provider
- Before- and after-school care
- Day camp
- In-house dependent day care

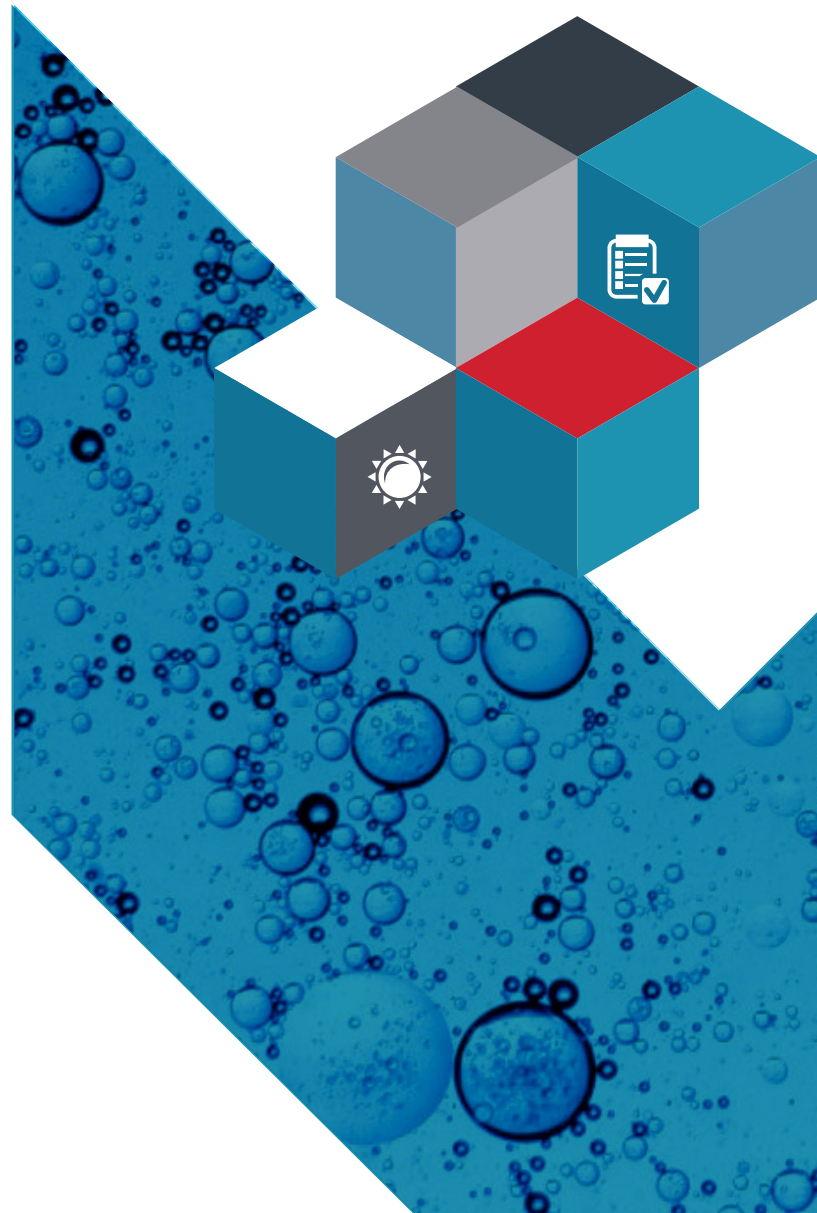
Due to federal regulations, expenses for your domestic partner and your domestic partner's children may not be reimbursed under the FSA programs. Check with your tax advisor to determine if any exceptions apply.



HOW TO USE THE ACCOUNT

Once you incur an eligible expense, submit a claim form along with the required documentation. If you need to submit a receipt, you will be notified by Optum Bank. Always retain a receipt for your records.

- You cannot change your FSA election in the middle of the plan year unless you experience a qualifying life event.
- Terminated employees have thirty (30) days following the date of termination to submit their FSA claims for reimbursement.



FSA vs FHA

Flex your spending power! A Flexible Spending Account (FSA) is a special tax-free account you put money into to pay for certain out-of-pocket expenses.

	FSA	HSA
OWNERSHIP	Your employer owns your FSA.	You own your HSA.
ELIGIBILITY & ENROLLMENT	You're eligible for an FSA if it's offered by your employer. You cannot be enrolled in both a Healthcare FSA and an HSA.	<ol style="list-style-type: none"> 1. You must be enrolled in a Qualified High Deductible Health Plan. 2. You can change your contribution at any time during the Plan Year.
TAXATION	Contributions are tax free via payroll deduction. However, the funds spent are not tax free.	<p>For Federal tax purposes, the money in the account is "triple tax free," meaning:</p> <ol style="list-style-type: none"> 1. Contributions are tax free. 2. The account grows tax free. 3. Funds are spent tax free (if used for qualified expenses).
CONTRIBUTIONS	Both you and your employer can contribute to the account according to IRS limits.	Both you and your employer can contribute to the account according to IRS limits.
ROLL OVER OR GRACE PERIOD	You may roll over up to \$500 in unused FSA funds to the following plan year. You forfeit any additional funds.	The money in the account rolls over from year to year. Funds are always yours and may be used for future qualified expenses.
QUALIFIED EXPENSES	Physician services, hospital services, prescriptions, menstrual products, over-the-counter medications, dental care and vision care. A full listing of eligible expenses is available at www.irs.gov .	IRS publication 502, which can be found on www.irs.gov , has a complete list of HSA eligible expenses. Funds you use for noneligible health expenses before you reach age 65 are subject to tax penalties.

Please refer to your Summary Plan Description or plan certificate for your plan's specific FSA or HSA benefits.

DENTAL BENEFITS



VISION BENEFITS



Brushing your teeth and flossing are great, but don't forget to visit the dentist too! Select Energy Services offers affordable plan options for routine care and beyond. Coverage is available from MetLife.

Don't wear glasses? Even you shouldn't skip an annual eye exam! Select Energy Services provides you and your family access to quality vision care with a comprehensive vision benefit through MetLife.

NETWORK DENTISTS

If you use a dentist who doesn't participate in your plan's network, your out-of-pocket costs will be higher, and you are subject to any charges beyond the Reasonable and Customary (R&C). To find a network dentist, visit MetLife at www.metlife.com/mybenefits.

DENTAL		
CALENDAR YEAR DEDUCTIBLE		
INDIVIDUAL	\$50	
FAMILY	\$150	
CALENDAR YEAR MAXIMUM		
PER PERSON	\$2,250	
COVERED SERVICES		
PREVENTIVE SERVICES Oral Exams, Cleanings, X-rays, Sealants, Space Maintainers / Harmful Habit Appliances and Fluoride Treatment	Covered in full (no deductible)	
BASIC SERVICES Fillings, Periodontal Services & Surgery, Simple & Complex Extractions, Endodontic Services, General Anesthesia and Oral Cancer Screenings	20%*	
MAJOR SERVICES Bridges & Dentures, Implants, Simple Crowns, Repair & Maintenance of Crowns, Inlays, Onlays, Veneers, and TMJ	50%*	
ORTHODONTICS Adults and Child(ren); Orthodontia in progress is covered	50%	
Orthodontic Lifetime Maximum	\$2,000	
BI-WEEKLY CONTRIBUTIONS		
EMPLOYEE ONLY	\$6.50	
EMPLOYEE + SPOUSE	\$14.50	
EMPLOYEE + CHILD(REN)	\$15.00	
EMPLOYEE + FAMILY	\$24.00	

*After Deductible



THOUGHTS & TIPS

Only 60% of adults ages 20 to 64 have been to the dentist in the past year. Take advantage of your dental coverage to keep your smile healthy.

	VISION		
	IN-NETWORK	OUT-OF-NETWORK	FREQUENCY
EXAMS			
COPAY	\$10 copay	Up to \$45 allowance	Once every 12 months
LENSES			
SINGLE VISION	\$25 copay	Up to \$30 allowance	Once every 12 months
BIFOCAL	\$25 copay	Up to \$50 allowance	
TRIFOCAL	\$25 copay	Up to \$65 allowance	
LENTICULAR	\$25 copay	Up to \$100 allowance	
CONTACTS (IN LIEU OF LENSES AND FRAMES)			
ELECTIVE	\$160 allowance, copay does not apply	Up to \$105 allowance	Once every 12 months
FRAMES			
COPAY	\$160 allowance on frames, 20% discount thereafter	Up to \$70 allowance	Once every 24 months
SAFEGUARD VISION			
EXAMS	Covered in full	Benefits for specialized safety eyewear are NOT available at retail chains including Costco, Walmart, and Sam's Club. Prior to your exam, you will need to give your eye doctor a completed Safety Questionnaire. Download at www.metlife.com/mybenefits	Once every 12 months
LENSES	Covered in full after copay to include single vision, bifocal, trifocal, or lenticular		
FRAMES	\$65 allowance, receive 20% off any amount over allowance. Lens enhancements available for additional cost. Plano and rimless lenses are not covered.		
BI-WEEKLY CONTRIBUTIONS			
EMPLOYEE ONLY		\$2.15	
EMPLOYEE + SPOUSE		\$4.10	
EMPLOYEE + CHILD(REN)		\$5.10	



Vithun Kh

VISION

MetLife | 800-438-6388 | www.metlife.com/mybenefits

THOUGHTS & TIPS

More than 150 million Americans use corrective eyewear to compensate for refractive errors.

DENTAL
MetLife | 800-438-6388 | www.metlife.com/mybenefits

SURVIVOR BENEFITS

BASIC LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE

Select Energy Services provides eligible employees with Basic Life and AD&D insurance through MetLife at **NO COST TO YOU**. You are automatically enrolled with \$50,000 in coverage for each plan once you have met the waiting period. You are eligible for an AD&D benefit in addition to any life insurance payment if you are injured or die within 365 days of a covered accident. Your basic life and AD&D coverage amount will begin to reduce based on age once you reach 65.

Select Energy Services provides an additional company-paid life insurance benefit for eligible spouses and children, as shown below.

VOLUNTARY LIFE AND AD&D INSURANCE

VOLUNTARY EMPLOYEE LIFE AND AD&D	
COVERAGE AMOUNT	In increments of \$10,000
WHO PAYS	Employee
MAXIMUM BENEFIT	Up to \$1,000,000
EVIDENCE OF INSURABILITY (EOI) REQUIRED	New Hires: Guarantee Issue, the lesser of 3x pay or \$300,000 Open Enrollment: Can increase coverage up to the next \$10,000 benefit level without the requirement for an EOI, not exceed Guaranteed Issue. EOI rules apply for Vol Life only. AD&D does not require EOI.
VOLUNTARY SPOUSE LIFE AND AD&D	
COVERAGE AMOUNT	In increments of \$5,000
WHO PAYS	Employee
MAXIMUM BENEFIT	Up to \$150,000 (not to exceed 50% of employee's amount)
EVIDENCE OF INSURABILITY (EOI) REQUIRED	New Hire: Spouse Guarantee Issue \$50,000. EOI required for amounts over Guarantee Issue. Open Enrollment: Employees with current dependent coverage may request an increase, but all dependent increases are subject to EOI. Existing employees may enroll in coverage for the first time (beyond 31 days of 1st eligibility), but any requested amount is subject to EOI. EOI rules apply for Vol Life only. AD&D does not require EOI.
VOLUNTARY CHILD LIFE AND AD&D	
COVERAGE AMOUNT	In increments of \$2,000
WHO PAYS	Employee
MAXIMUM BENEFIT	Up to \$10,000 (not to exceed 50% of employee's amount)
EVIDENCE OF INSURABILITY (EOI) REQUIRED	\$10,000 EOI rules apply for Vol Life only. AD&D does not require EOI.



INCOME PROTECTION

Maintaining your quality of life counts on your income. Select Energy Services offers disability coverage to protect you financially in the event you cannot work as a result of a debilitating injury. A portion of your income is protected until you can return to work or until you reach retirement age.

BASIC SHORT TERM DISABILITY (STD) INSURANCE

Short Term Disability (STD) benefits are available at no cost. STD insurance replaces 60% of your income if you become partially or totally disabled for a short time. Certain exclusions, along with pre-existing condition limitations, may apply. See your plan documents or Benefits Department for details.

WEEKLY MAXIMUM BENEFIT	\$1,500
ELIMINATION PERIOD	14 calendar days
MAXIMUM BENEFIT PERIOD	15 weeks total (13 weeks paid)

BASIC LONG TERM DISABILITY (LTD) INSURANCE

Long Term Disability (LTD) benefits are available at no cost. LTD insurance replaces 60% of your income if you become partially or totally disabled for an extended time. Certain exclusions, along with pre-existing condition limitations, may apply. See your plan documents or Benefits Department for details.

WEEKLY MAXIMUM BENEFIT	\$7,000
ELIMINATION PERIOD	90 days
MAXIMUM BENEFIT PERIOD	<ul style="list-style-type: none"> Up to 24 months if you cannot perform your own occupation Up to Social Security normal retirement age if you cannot perform any occupation (dependent upon the age of the employee once disabled)

THOUGHTS & TIPS

Nearly 6% of working Americans will experience a short term disability due to illness, injury or pregnancy on average every year.



SUPPLEMENTAL HEALTH BENEFITS



Select Energy Services offers several ways for you to supplement your medical plan coverage. This additional insurance can help cover unexpected expenses, regardless of any benefit you may receive from your medical plan. Coverage is available for yourself and your dependents and is offered at discounted group rates.

All accident, critical illness, and hospital confinement insurance rates and a schedule of benefits can be found by logging into Dayforce (www.dayforcehcm.com).

ACCIDENT COVERAGE

Accidents happen. You can't always prevent them, but you can take steps to reduce the financial impact. Accident Coverage, available through Voya, provides benefits for you and your covered family members if you have expenses related to an accidental injury. Health insurance helps with medical expenses, but this coverage is an additional layer of protection that can help you pay deductibles, copays and even typical day-to-day expenses such as a mortgage or car payment. Benefits under this plan are payable to you to use as you wish.

The Accident insurance plan pays cash benefits to help with costs associated with out-of-pocket expenses and bills in the event of a covered accident:

HOSPITAL INDEMNITY COVERAGE

Hospital Indemnity Coverage through Voya pays cash benefits directly to you if you have a covered stay in a hospital or critical care unit. The benefit amount is determined based on the type of facility and the number of days you stay. You can use the benefits from this policy to help pay for your medical expenses such as deductibles and copays, travel cost, food and lodging or everyday expenses such as groceries and utilities.

Plan Highlights

- Guaranteed Issue Coverage (no medical questions)
- Pre-Existing Conditions: This plan does NOT have a pre-existing condition exclusion. Benefits are payable for hospitalizations that occur on or after the effective date of your policy.
- Wellness Benefit: A \$50 wellness benefit is payable for each covered member for completing certain wellness screenings such as a pap test, cholesterol test, mammogram, colonoscopy or stress test (\$25 benefit per child, max \$100 for all children).

SUPPLEMENTAL HEALTH
(Accident, Critical Illness, Hospital Indemnity)
Voya | 800-537-5024 | www.voya.com

CRITICAL ILLNESS COVERAGE

Critical Illness coverage through Voya pays a lump-sum benefit if you are diagnosed with a covered disease or condition. You can use this money however you like; for example: to help pay for expenses not covered by your medical plan, lost wages, child care, travel, home healthcare costs or any of your regular household expenses.

COVERED BENEFITS

(paid at 100% of your elected benefit amount unless otherwise noted):

- Heart Attack
- Stroke
- Coronary Artery Bypass (25%)
- Invasive Cancer
- Carcinoma in Situ (25%)
- Skin Cancer (10%)
- Benign Brain Tumor
- End Stage Renal Failure
- Major Organ Failure
- Alzheimer's Disease
- Coma
- Complete Blindness
- Complete Loss of Hearing
- Infectious Disease
- Amyotrophic Lateral Sclerosis (ALS)
- Multiple Sclerosis
- Occupational HIV
- Parkinson's Disease
- Permanent Paralysis
- Pre-Existing Conditions: This plan does NOT have a pre-existing condition exclusion; however, your date of diagnosis must be on or after the effective date of your policy for benefits to be paid.
- Wellness Benefit: A \$50 wellness benefit is payable for each covered member for completing certain wellness screenings such as a pap test, cholesterol test, mammogram, colonoscopy or stress test (\$25 benefit per child, max \$100 for all children)

RETIREMENT PLANNING



Whether you're just starting out in your career or you've been in the workforce for years, it's always a good time to plan for retirement.

Contributing to a 401(k) account now can help keep you financially secure later in life. The Select Energy Services 401(k) plan provides you with the tools and flexibility you need to prepare.

you'll have to pay taxes on the funds when you withdraw them during retirement. If you choose the available Roth 401(k), contributions will be deducted from your paycheck after taxes — so you won't pay taxes when you withdraw during retirement. Once you retire, you might be in a higher tax bracket, so contributing after taxes now could save you money in the long run.

PLAN AT A GLANCE	
PLAN NAME	Select Energy Services 401(k) Plan
RECORDKEEPER	Fidelity
WEBSITE	www.netbenefits.com
COMPANY MATCH	<p>Our 401(k) plan is a valuable tool to help you save for the future and receive tax advantages.</p> <ul style="list-style-type: none"> • Contribute up to 75% of your eligible pay through convenient payroll deductions. • Elect pre-tax contributions, Roth contributions (which are deducted after taxes) or a combination of both. <p>- Funds from pretax contributions are tax-deferred; you don't pay taxes on them until you withdraw them at retirement.</p>

CONTRIBUTING TO THE PLAN

The deferred contribution limit set annually by the IRS is \$19,500 for 2021.

If you are age 50 or older this calendar year and you already contribute the maximum allowed to your 401(k) account, you may also make a "catch-up contribution." This additional deposit accelerates your progress toward your retirement goals. The maximum catch-up contribution is \$6,500 for 2021 — for a combined total contribution allowance of \$26,000. See your plan administrator for details.

What is a 401(k)? This employer-sponsored retirement account can help build and create choices for your future self by saving money — tax free — from your paycheck. Due to the value of compounding interest, the sooner you participate in a 401(k), the better.

Eligible employees can invest for retirement while receiving certain tax advantages. Administrative and record-keeping services for this plan are provided by Fidelity. You may start making pre-tax contributions into the plan. You must be at least years of age to be eligible.

Pre-tax vs. Roth 401(k): What's the difference? If you contribute to your 401(k) pre-tax, your contributions will be taken out before taxes each pay period. However,

Think you might be getting close to the annual contribution limit? Our payroll system tracks how much you've contributed. If you started at the company mid-year, let the Payroll Department know how much you contributed at your previous employer so that can be factored in.

HOW MUCH SHOULD I BE SAVING?

Industry standards suggest saving, at a minimum, 12% to 15% of your income, inclusive of Select Energy Services's generous matching contribution. If you cannot afford to save that much right now, at least make sure to be saving up to the matching amount so you are not leaving free money behind.

RETIREMENT
Fidelity | 800-294-4015 | www.netbenefits.com



1. To use this QR code, open the QR Code reader or camera on your smart phone or tablet. - If you don't have a QR Code reader you can download one from a smartphone's app store.
2. Hold your device over the QR Code, so that it's clearly visible within your smart device's screen. - If necessary, press the button.
3. Your device will open the Fidelity site to login.

EMPLOYEE STOCK PURCHASE PLAN (ESPP) & ADDITIONAL BENEFITS

Select Energy Services cares about you and wants you to succeed in all aspects of life, so we offer a variety of additional benefits to help make your day-to-day easier.

The ESPP provides an opportunity for employees of Select Energy Services, Inc. to purchase shares of company stock. Participants elect to have a portion of their paycheck withheld to purchase shares at the end of each offering period at a discounted price. You must activate your account before you can enroll. Visit www.solium.com/activate and follow the steps below.

If you have an @selectenergyservices.com email account:

1. Enter your @selectenergyservices.com email address to have an activation link emailed to you.
2. Enter identifying information.
3. Receive account login information.

WHEN TO ENROLL

ENROLLMENT BEGINS	ENROLLMENT ENDS	CONTRIBUTION PERIOD
May 1, 2021	May 20, 2021	June 1 - August 31, 2021
August 1, 2021	August 20, 2021	September 1 - November 30, 2021
October 31, 2021	November 19, 2021	December 1, 2020 - February 28, 2022
January 29, 2022	February 17, 2022	March 1, 2021 - May 31, 2022
May 1, 2022	May 20, 2022	June 1, 2021 - August 31, 2022

EMPLOYEE ASSISTANCE PROGRAM

We know life is complicated, and sometimes we all just need a little help. Our Employee Assistance Program (EAP) helps manage your and your family's total health, including mental, emotional and physical. And it comes at no cost to you — whether you're enrolled in a company-sponsored medical plan or not.

Through this program, you have access to mental health assistance and legal and financial help from a number of professionals. You have 24-hour access to helpful resources by phone, and the EAP benefit includes three face-to-face visits per issue with a licensed professional. All services provided are confidential and will not be

If you DO NOT have an @selectenergyservices.com email account:

1. Activate your account using our company code. Company Code: **WTTR** Password: **WTTR100**
2. Enter identifying information.
3. You'll see a confirmation screen once your activation is complete. Take note of the confirmation number for your reference.
4. Solium will postal mail you your account number and temporary passwords (one to log in and one to transact) in separate letters. This could take up to 10 business days.
5. If you do not want to wait for these letters to access your account, please contact the Participant Services Group at **877-380-7793** to receive your account login information.

shared with Select Energy Services. The Program provides referrals to help with:

- Emotional health and well-being
- Alcohol or drug dependency
- Marriage or family relationship problems
- Job pressures
- Stress, anxiety, depression
- Grief and loss
- Financial or legal advice

GLOSSARY

Balance Billing – When you are billed by a provider for the difference between the provider's charge and the allowed amount. For example, if the provider's charge is \$100 and the allowed amount is \$60, you may be billed by the provider for the remaining \$40.

Coinsurance – Your share of the cost of a covered healthcare service, calculated as a percent of the allowed amount for the service, typically after you meet your deductible.

Copay – The fixed amount, as determined by your insurance plan, you pay for healthcare services received.

Deductible – The amount you owe for healthcare services before your health insurance begins to pay its portion. For example, if your deductible is \$1,000, your plan does not pay anything until you've paid \$1,000 for covered services. This deductible may not apply to all services, including preventive care.

Explanation of Benefits (EOB) – A statement from your insurance carrier that explains which services were provided, their cost, what portion of the claim was paid by the plan, and what portion is your liability, in addition to how you can appeal the insurer's decision.

High Deductible Health Plan (HDHP) – A plan option that provides choice, flexibility and control when it comes to healthcare spending. Most preventive care is covered at 100% with in-network providers, there are no copays and all qualified employee-paid medical expenses count toward your deductible and your out-of-pocket maximum.

Over-the-Counter (OTC) Medications – Medications available without a prescription.

Prescription Medications – Medications prescribed by a doctor. Cost of these medications is determined by their assigned tier: generic, preferred, non-preferred or specialty.

- **Generic Drugs** – Drugs approved by the U.S. Food and Drug Administration (FDA) to be chemically identical to corresponding preferred or non-preferred versions. Usually the most cost-effective version of any medication.
- **Preferred Drugs** – Brand-name drugs on your provider's approved list (available online).
- **Non-Preferred Drugs** – Brand-name drugs not on your provider's list of approved drugs. These drugs are typically newer and have higher copayments.
- **Specialty Drugs** – Prescription medications used to treat complex, chronic and often costly conditions. Because of the high cost, many insurers require that specific criteria be met before a drug is covered.
- **Prior Authorization** – A requirement that your physician obtain approval from your health insurance plan to prescribe a specific medication for you.
- **Step Therapy** – The goal of a Step Therapy Program is to steer employees to less expensive, yet equally effective, medications while keeping member and physician disruption to a minimum. You must typically try a generic or preferred-brand medication before "stepping up" to a non-preferred brand.

Reasonable and Customary Allowance (R&C) – Also known as the UCR (Usual, Customary, and Reasonable) amount. The amount paid for a medical service in a geographic area based on what providers in the area usually charge for the same or similar medical service. The R&C amount is sometimes used to determine the allowed amount.



getting
BNBB SUD

