CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



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BUYER/TRANSFEREE	— L	RECOR	DING DATA	
	Da	ate Recorded:		_
MAILING ADDRESS	Do	ocument Number:		_
	As	ssessor's Identification N	lumber:	
SELLER/TRANSFEROR		MB	PG PCL	
MAILING ADDRESS	Pho	ne Numbers:		
	Buy	er: ()	_	
FIELD	Selle			
IMPORTANT NOTICE	Sec	: Twp:	Rng:	
The law requires any transferee acquiring an interest in real prope	rty or manufactured	home subject to local	property taxation, and that	at is
assessed by the county assessor, to file a Change in Ownership Sta	tement with the Coun	nty Recorder or Assess	or. The Change in Owners	ship
Statement must be filed at the time of recording or, if the transfer is n that where the change in ownership has occurred by reason of deat				
the estate is probated, shall be filed at the time the inventory and ap				
90 days from the date of a written request by the Assessor results in				
taxes applicable to the new base year value reflecting the change in o but not to exceed five thousand dollars (\$5,000) if the property is elig				
if the property is not eligible for the homeowners' exemption if that f				
roll and shall be collected like any other delinquent property taxes, a	i <mark>nd</mark> be <mark>su</mark> bject to the s	same penalties for nonp	payment.	
A. TRANSFER INFORMATION (Check the appropriate boxes to in	dicate the method by	which you acquired an i	interest in the property.)	
1. Purchase (complete Sections B and C on the reverse side).		sfer solely between husba		
2. Land Sales Contract. A contract for the purchase of property	addition of a s	spouse, divorce settlemen	nt, etc.? 🗌 Yes 🗌	No
in which the seller retains legal title to it after the buyer takes	14. Was this trans	action only a correction of	of the	
possession.		ersons or entities holding t		1
3. Inheritance. Transfer by will or intestate succession.	the property?		∐ Yes ∐	No
 Inheritance. Transfer by will or intestate succession. 	15. If you hold title	e to this property as a join	it tenant,	
Relationship to deceased	is the seller or	r transferor also a joint ter	nant? 🗌 Yes 🗌] No

- 4. Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.
- 5. Merger or stock acquisition.
- 6. Partial interest transfer. Was less than 100 percent of the property transferred? If **yes**, indicate the percentage transferred ______%.
- 7. Foreclosure or trustee sale.
- 8. Gift.
- 9. Life estate.
- 10. Reconveyance (pay-off).

12. Termination of a lease:

11. Creation or assignment of a lease:

	addition of a spouse, divorce settlement, etc.?	🗌 Yes	🗌 No
14.	Was this transaction only a correction of the name(s) of persons or entities holding title to the property?	Yes	🗌 No
15.	If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?	🗌 Yes	🗌 No
16.	Was this transaction the termination of a joint tenancy interest?	🗌 Yes	🗌 No
17.	Was this transfer between family members or related businesses?	🗌 Yes	🗌 No
18.	Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	Yes	🗌 No
19.	Was this document recorded to create, assign, or terminate a lender's interest in this property?	🗌 Yes	🗌 No
20.	Has this property been transferred to a trust? If yes , is the trust: Revocable Irrevocable	☐ Yes	🗌 No
21.	If the trust is irrevocable, is the transferor or the transferor's spouse the sole present beneficiary?	🗌 Yes	🗌 No
22	Does this property revert to the transferor in		

If you answered no to 21 or 22, attach a copy of the trust agreement.

(Please complete the reverse side.)

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)



EF-502-G-R05-1111-06000390-2 BOE-502-G (P2) REV. 5 (11-11)

B. PROPERTY INFORMATION (Complete each item as it applies to this transaction.)

1.	Seller's name and address:			
2.	Field name:	Lease name:	Parcel number:	
3.	Date sales agreement or letter of intent signed:		Effective transfer date:	
	• •		r: Date:	
	•	-	h the transaction and would be available to answer quest	
5.	relative to the transaction:			
6.	Name, address, and phone number of any cons	sultants used in connection with the tr	ansaction:	
7.	Interest acquired (please report decimal fraction	ns out of total; e.g., 0.875 out of 1.000	0).	
	Revenue interest: Working	g interest: Othe	r working interest owners & percentages:	
8.	Number of wells: Producing		All idle Other	
	Productive acres in the parcel:		acres in the parcel:	
10.	Production rates at acquisition: Oil	b/d Gas	mcf/d Water	b/d
11.	Price received for oil and gas at acquisition: O		\$/b_ Gas\$/r	ncf
12.	Oil gravity: API G	as: btu/m	cf Average producing depth:	ft
			bbl Gas	mcf
	•		bbl Gas	
14			t in establishing a purchase price?	
	a. If yes , please enclose copies of those appra most relied upon in establishing the purchas	isals, evaluations, cash flow projectic e price.	ons or analyses. Please identify the analysis or appraisal	
	b. If no, please explain in Section D how the pu	urchase price was determined.		
15.	Please enclose a copy of the following:			
	agreements.		as well as other related agreements or contracts, such as	
	wells and related equipment, separately.		if not included in item 15a. Please list each lease, includ	ing
C.	c. The allocation to your company books of the PURCHASE PRICE OR TRANSFER AMOUNT	INFORMATION		
	Terms: Total purchase price:		ash to seller:	
			Interest rate(s):	
	Source(s) of financing (bank, seller, etc.):			
	Purchase price allocated to: Fixed plant & equ		Moveable equipment	
D.	REMARKS (Please include below any addition	al information about the sale or transf	<mark>er which sh</mark> ould <mark>b</mark> e called to the attention of the Assessol	r.)
		CERTIFICATION		
Par	including any accompany poration declaration is binding	, , , , ,	the State of California that the foregoing and all information he correct and complete to the best of my knowledge and beliet partner.	
Oth				
NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE	
SIGN	IATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE	
			Ditt 2	
NAM	E OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER	
PRE	PARER'S NAME AND ADDRESS (typed or printed)		TITLE	
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS			
(

