EF-502-G-R05-1111-07000363-1 BOE-502-G (P1) REV. 5 (11-11)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY



Gus Kramer County Assessor

2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

File this statement by:	

BUYI	ER/TR	ANSFEREE	RECORDING DATA
			Date Recorded:
MAIL	ING A	DDRESS	Document Number:
			Assessor's Identification Number:
SELL	.ER/TF	RANSFEROR	MB PG PCL
MAIL	ING A	DDRESS	Phone Numbers:
			Buyer: ()
FIEL	D	LEASE	Seller:
			Sec: Twp: Rng:
		RTANT NOTICE	
			erty or manufactured home subject to local property taxation, and that is
			t <mark>teme</mark> nt with th <mark>e County Recorder</mark> or Asse <mark>ss</mark> or. The C <mark>ha</mark> nge in Ownership not recorded, within 90 days of the date of the change in ownership, except
			th the statement shall be filed within 150 days after the date of death or, if
			praisal is filed. The failure to file a Change in Ownership Statement within
90 d	days	from the date of a written request by the Assessor results in	a penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the
			wnership of the real property or manu <mark>fac</mark> tured home, whichever is greater,
			gible for the homeowners' exemption or twenty thousand dollars (\$20,000)
		shall be collected like any other delinquent property taxes, a	fa <mark>ilu</mark> re to file was not wi <mark>llfu</mark> l. This pe <mark>na</mark> lty will be added to the assessment
Α.	TR	ANSFER INFORMATION (Check the appropriate boxes to inc	dicate the method by which you acquired an interest in the property.)
1.		Purchase (complete Sections B and C on the reverse side).	13. Was this transfer solely between husband and wife, addition of a spouse, divorce settlement, etc.?
2.	Ш	Land Sales Contract. A contract for the purchase of property	
		in which the seller retains legal title to it after the buyer takes	14. Was this transaction only a correction of the name(s) of persons or entities holding title to
		possession.	the property?
3.		Inheritance. Transfer by will or intestate succession.	
		Date of death	15. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant? ☐ Yes ☐ No
		Relationship to deceased	is the seller of transferor also a joint terrant:
4.		Trade or exchange. The above described property has been	16. Was this transaction the termination of a joint
		traded or exchanged for other real property or tangible personal	tenancy interest?
		property.	17. Was this transfer between family members or
5.		Merger or stock acquisition.	related businesses?
			18. Was this document recorded to substitute a trustee
6.		Partial interest transfer. Was less than 100 percent of the	under a deed of trust, mortgage, or other similar
		property transferred? If yes, indicate the percentage	document?
		transferred %.	19. Was this document recorded to create, assign,
7	П	Foreclosure or trustee sale.	or terminate a lender's interest in this property?
• •			
8.		Gift.	20. Has this property been transferred to a trust? ☐ Yes ☐ No If yes , is the trust: ☐ Revocable ☐ Irrevocable
			·
9.	Ш	Life estate.	21. If the trust is irrevocable, is the transferor or the
10		Becomiguence (nov. off)	transferor's spouse the sole present beneficiary? $\ \square$ Yes $\ \square$ No
10.	Ш	Reconveyance (pay-off).	22. Does this property revert to the transferor in
11.		Creation or assignment of a lease:	12 years or less? (Clifford Trust)
11.	Ш	(date)	If you answered no to 21 or 22, attach a copy of the trust
12.		Termination of a lease:	agreement.
	_	(date)	(Please complete the reverse side.)

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



B.	PROPERTY INFORMATION (Complete each item as it appl	es 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:			
4.	Closing date: Recor	ding document: Number: Date:			
5.	5. Name, address and phone number of person with purchasing firm who is familiar with the transaction and would be available to answer questions relative to the transaction:				
6.	Name, address, and phone number of any consultants used	n connection with the transaction:			
7.	Interest acquired (please report decimal fractions out of totals	e.a., 0.875 out of 1.000).			
		Other working interest owners & percentages:			
8.	Number of wells: Producing Injection	n All idle Other			
		Total acres in the parcel:			
		b/d Gasb/d			
	Price received for oil and gas at acquisition: Oil	\$/b Gas \$/mcf			
	Oil gravity:API Gas:	btu/mcf Average producing depth:ft			
	Proved reserves: Developed: Oil				
	Undeveloped: Oil				
14.		analyses made to assist in establishing a purchase price?			
	 a. If yes, please enclose copies of those appraisals, evaluate most relied upon in establishing the purchase price. b. If no, please explain in Section D how the purchase price. 	ons, cash flow projections or analyses. Please identify the analysis or appraisal was determined.			
15.	Please enclose a copy of the following:				
		amendments thereto, as well as other related agreements or contracts, such as loan			
	agreements.				
	wells and related equipment, separately.	umed in the acquisition, if not included in item 15a. Please list each lease, including			
	c. The allocation to your company books of the total acquisi	ion price, by specific items.			
C.	PURCHASE PRICE OR TRANSFER AMOUNT INFORMATI				
	Terms: Total purchase price:	Cash to seller:			
	Production and/or conventional loan(s):	Amount(s): Interest rate(s):			
	Source(s) of financing (bank, seller, etc.):				
	Purchase price allocated to: Fixed plant & equipment:	Moveable equipment			
D.		about the sale or transfer which should be called to the attention of the Assessor.)			
		CERTIFICATION			
Par	including any accompanying statement declaration is binding on each and	nerjury under the laws of the State of California that the foregoing and all information hereon, at some or documents, is true, correct and complete to the best of my knowledge and belief. This every co-owner and/or partner.			
_	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	TITLE			
SIGN	IATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE			
NIAL	C OF ENTITY //ward av aviated	FEDERAL FAIRLOVER IS AUTHORS			
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				

