EF-502-G-R06-0516-07000107-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



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

BUY	ER/TR	ANSFEREE		RECORDING DATA	
				Date Recorded:	
MAIL	ING A	DDRESS		Document Number:	
				Assessor's Identification Number:	
SELL	.ER/TF	RANSFEROR		MB PG	PCL
MAII	ING A	DDRESS		Phone Numbers:	
IVIZAL		BBNEGG		5 ()	
FIEL	D	LEASE		Buyer:	
				Seller:	
IМ	PΩ	RTANT NOTICE		Sec: Twp: F	Rng:
		requires any transferee acquiring an interest in real proper	ty or n	nanufactured home subject to local property ta	xation, and that is
ass	esse	d by the county assessor, to file a Change in Ownership Stat	ement	with the County Recorder or Assessor. The Cha	nge in Ownership
		ent must be filed at the time of recording or, if the transfer is no			
		ere the change in ownership has occurred by reason of death te is probated, shall be filed at the time the inventory and app			
		from the date of a written request by the Assessor results in a			
		plicable to the new base year value reflecting the change in ov			
		to exceed five thousand dollars (\$5,000) if the property is elig			
		operty is not eligible for the homeowners' exemption if that fa			to the assessment
roll		shall be collected like any other delinquent property taxes, ar	_		
Α.	TR	ANSFER INFORMATION (Check the appropriate boxes to ind	icate tl	he method by which you acquired an interest in th	ne property.)
1.		Purchase (complete Sections B and C on the reverse side).	13.	Was this transfer/addition solely between spouses	
2.	П	Land Sales Contract. A contract for the purchase of property		or registered domestic partners, divorce settlement	t, L Yes L No
		in which the seller retains legal title to it after the buyer takes		etc.?	
		possession.	14.	Was this transaction only a correction of the	
3.	П	Inheritance. Transfer by will or intestate succession.		name(s) of persons or entities holding title?	☐ Yes ☐ No
٥.	ш	Date of death	15.	If you hold title to this property as a joint tenant,	
		Relationship to deceased		is the seller or transferor also a joint tenant?	☐ Yes ☐ No
			16	Was this transaction the termination of a joint	
4.	Ш	Trade or exchange. The above described property has been		tenancy interest?	☐ Yes ☐ No
		traded or exchanged for other real property or tangible personal property.	47		
	_	property.	17.	Was this transfer between family members or related businesses?	☐ Yes ☐ No
5.	Ш	Merger or stock acquisition.		related businesses?	□ res □ no
			18.	Was this document recorded to substitute a trustee	!
6.	Ш	Partial interest transfer. Was less than 100 percent of the		under a deed of trust, mortgage, or other similar	□ v _{ee} □ v _e
		property transferred? If yes , indicate the percentage transferred %.		document?	☐ Yes ☐ No
		//.	19.	Was this document recorded to create, assign,	
7.		Foreclosure or trustee sale.		or terminate a lender's interest in this property?	☐ Yes ☐ No
			20	Has this property been transferred to a trust?	☐ Yes ☐ No
8.		Gift.		If yes , is the trust: Revocable Irrevocable	
0		I ife cotate	24	•	
9.	Ш	Life estate.	21.	If the trust is irrevocable, is the transferor or the	☐ Yes ☐ No
10.		Reconveyance (pay-off).		transferor's spouse or registered domestic partner the sole present beneficiary?	□ res □ N0
		The state of the s		parties the sole present beneficially:	
11.		Creation or assignment of a lease:	22.	Does this property revert to the transferor in	
		(date)		12 years or less? (Clifford Trust)	☐ Yes ☐ No
12.		Termination of a lease:		If you answered no to 21 or 22 attach a convin	f the trust

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

agreement.



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В.	PROPERTY INFORMATION (Complete each item as it applies to this transaction.)						
1.							
2.	Field name: Lease name	e: Parcel number:					
3.	Date sales agreement or letter of intent signed:	Effective transfer date:					
4.	Closing date: Recor	ding document: Number: Da	ate:				
5.	Name, address and phone number of person with purchasing relative to the transaction:		vailable to answer questions				
6.	Name, address, and phone number of any consultants used in connection with the transaction:						
7.	Interest acquired (please report decimal fractions out of total; e.g., 0.875 out of 1.000).						
	Revenue interest: Working interest:	Other working interest owners & percentage of the percentage of th	entages:				
8.		n All idle					
9.	Productive acres in the parcel:	Total acres in the parcel:					
10.	Production rates at acquisition: Oil						
	Price received for oil and gas at acquisition: Oil	\$/b Gas	\$/mcf				
12.	Oil gravity:API Gas:	btu/mcf Average producing depth:	ft				
	Proved reserves: Developed: Oil	bbl Gas	mcf				
	Undeveloped: Oil	bbl Gas	mcf				
14.	Were appraisals, evaluations, cash flow projections or other a	analyses made to assist in establishing a purchase price	? 🗌 Yes 🗌 No				
15.	 a. If yes, please enclose copies of those appraisals, evaluat most relied upon in establishing the purchase price. b. If no, please explain in Section D how the purchase price Please enclose a copy of the following: a. The sales agreement or contract including all exhibits and agreements. b. A complete listing of all assets acquired and liabilities ass wells and related equipment, separately. 	was determined. I amendments thereto, as well as other related agreement	nts or contracts, such as loan				
C.	c. The allocation to your company books of the total acquisition price, by specific items. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION						
٥.	Terms: Total purchase price:						
	Production and/or conventional loan(s):		nterest rate(s):				
	Source(s) of financing (bank, seller, etc.):		ntoroot rato(o).				
	Purchase price allocated to: Fixed plant & equipment:	Moveable equipment					
D.	REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)						
		CERTIFICATION					
Pari Cor		perjury under the laws of the State of California that the foregents or documents, is true, correct and complete to the best of every co-owner and/or partner.					
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	TITLE					
SIGN	ATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE					
NAM	E OF ENTITY (typed or printed)	FEDERAL EMPL	OYER ID NUMBER				
PRE	PARER'S NAME AND ADDRESS (typed or printed)	TITLE					
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS						

