CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



BUYER/TRANSFEREE	RECORDING DATA				
MAILING ADDRESS	Date Recorded: Document Number:				
SELLER/TRANSFEROR	Assessor's Identification Number:				
	MB PG PCL				
MAILING ADDRESS	Phone Numbers:				
	Buyer: ()				
FIELD	Seller:				
IMPORTANT NOTICE	Sec: Twp: Rng:				
	rty or manufac <mark>tu</mark> red home subject to local property taxation, and that is				
	tement with the County Recorder or Assessor. The Change in Ownership				
	ot recorded, within 90 days of the date of the change in ownership, except h 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 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 manufactured home, whichever is greater,				
	ible for the homeowners' exemption or twenty thousand dollars (\$20,000)				
roll and shall be collected like any other delinquent property taxes, and	ailure to file was not willful. This penalty will be added to the assessment nd be subject to the same penalties for nonpayment.				
	licate the method by which you acquired an interest in the property.)				
1. Device the sections B and C on the reverse side).	13. Was this transfer/addition solely between spouses				
2. Land Sales Contract. A contract for the purchase of property	or registered domestic partners, divorce settlement, 🗌 Yes 🗌 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				
	name(s) of persons or entities holding title?				
3. Inheritance. Transfer by will or intestate succession.	15. If you hold title to this property as a joint tenant,				
Date of death	is the seller or transferor also a joint tenant?				
Relationship to deceased					
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?				

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- 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 ______%.
- 8. Gift.
- 9. Life estate.
- 10. Reconveyance (pay-off).

12. Termination of a lease:

11. Creation or assignment of a lease:

22. Does this property revert to the transferor in 12 years or less? (*Clifford Trust*) Yes
If you answered no to 21 or 22, attach a copy of the trust agreement.

Was this transfer between family members or

18. Was this document recorded to substitute a trustee

under a deed of trust, mortgage, or other similar

or terminate a lender's interest in this property?

If **yes**, is the trust: Revocable Irrevocable

19. Was this document recorded to create, assign,

20. Has this property been transferred to a trust?

21. If the trust is irrevocable, is the transferor or the

transferor's spouse or registered domestic

partner the sole present beneficiary?

related businesses?

document?

🗌 Yes 🗌 No

Yes No

Yes No

🗌 Yes 🗌 No

🗌 Yes 🗌 No

🗌 Yes 🗌 No

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)

EF-502-G-R06-0516-10000403-2 BOE-502-G (P2) REV. 6 (05-16)

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 lette	er of intent signed:	Effective transfer date:		
4.	Closing date:	Recording docum	nent: Number: Date:		
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 in connection with the transaction:				
7	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 owned					
8.	Number of wells: Producing		All idle Other		
	Productive acres in the parce		Total acres in the parcel:		
10.	Production rates at acquisition	on: Oilb/d Gas	sb/d		
	Price received for oil and gas		\$/b_ Gas\$/mcf		
	Oil gravity:		btu/mcf Average producing depth: ft		
13.	Proved reserves: Deve	1	bbl Gasmcf		
			bbl Gasmcf		
14.			ade to assist in establishing a purchase price? 🗌 Yes 🛄 No		
			flow projections or analyses. Please identify the analysis or appraisal		
		lishing the purchase price. ection D how the purchase price was deterr	nined		
15	Please enclose a copy of the				
 a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, agreements. 					
	wells and related equipment	ent, separately.	e acquisition, if not included in item 15a. Please list each lease, including		
C.		mpany books of the total acquisition price, b ANSFER AMOUNT INFORMATION	y specific items.		
	Terms: Total purchase price	9:	Cash to seller:		
	Production and/or convention	nal loan(s):	Amount(s): Interest rate(s):		
	Source(s) of financing (bank,	r, seller, etc.):			
		Fixed plant & equipment:	Moveable equipment		
D.	REMARKS (Please include l	EMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)			
		CERTIFI			
Prop			r the laws of the State of California that the foregoing and all information hereon,		
		luding any accompanying statements or docun claration is binding on each and every co-o	nents, is true, correct and complete to the best of my knowledge and belief. This		
Othe	_	Jaration is binding on each and every co-o			
NAM	E OF ASSESSEE OR AUTHORIZED AC	GENT (typed or printed)	TITLE		
SIGN	IATURE OF ASSESSEE OR AUTHORIZ	2ED AGEN I	DATE		
NAME OF ENTITY (typed or printed)			FEDERAL EMPLOYER ID NUMBER		
PREPARER'S NAME AND ADDRESS (typed or printed)			TITLE		
D (1)		5 1441 4000500			
DAY1 ((IME TELEPHONE NUMBER	E-MAIL ADDRESS			

