## 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:
FIELD	Buyer: () Seller: Sec:Twp:Rng:
assessed by the county assessor, to file a Change in Ownership Stat Statement must be filed at the time of recording or, if the transfer is no that where the change in ownership has occurred by reason of death the estate is probated, shall be filed at the time the inventory and app 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 or but not to exceed five thousand dollars (\$5,000) if the property is elig	rty or manufactured 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 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, gible for the homeowners' exemption or twenty thousand dollars (\$20,000) ailure to file was not willful. This penalty will be added to the assessment
A. TRANSFER INFORMATION (Check the appropriate boxes to inc	dicate the method by which you acquired an interest in the property.)
<ol> <li>Purchase (complete Sections B and C on the reverse side).</li> <li>Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession.</li> </ol>	<ul> <li>13. Was this transfer solely between husband and wife, addition of a spouse, divorce settlement, etc.?</li> <li>14. Was this transaction only a correction of the name(s) of persons or entities holding title to</li> </ul>
3. Inheritance. Transfer by will or intestate succession. Date of death Relationship to deceased	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

- 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:

- tenancy interest? Yes No 17 Was this transfer between family members or 🗌 Yes 🗌 No related businesses? 18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar Yes No document? 19. Was this document recorded to create, assign, Yes No 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 21. If the trust is irrevocable, is the transferor or the 🗌 Yes 🗌 No transferor's spouse the sole present beneficiary?

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-R05-1111-15000404-2 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:	
			Date:	
	<ul> <li>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:</li> </ul>			
6.	5. 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 & percentages:			
8.	Number of wells: Producing	Injection	All idle Other	
9.	Productive acres in the parcel:	Total ad	pres in the parcel:	
10.	Production rates at acquisition: Oil	b/d Gas	mcf/d Waterb/d	
	Price received for oil and gas at acquisition: C		\$/bGas\$/mcf	
12.	Oil gravity: API G	as: btu/mc	f Average producing depth: ft	
			_ bbl Gas mcf	
	Undeveloped: Oil —		bbl Gas mcf	
14.	Were appraisals, evaluations, cash flow project	ions or other analyses made to assist i	n establis <mark>hi</mark> ng a purcha <mark>se</mark> price? 🛛 Yes 🗌 No	
		nisals, evaluations, cash flow projection se price.	s or analyses. Please identify the analy <mark>sis</mark> or appraisal	
15.	Please enclose a copy of the following:			
	a. The sales agreement or contract including a agreements.	Il exhibits and amendments thereto, as	well as other related agreements or contracts, such as loan	
	wells and related equipment, separately.		not included in item 15a. Please list each lease, including	
C.	c. The allocation to your company books of the PURCHASE PRICE OR TRANSFER AMOUNT	INFORMATION	s.	
	Terms: Total purchase price:	Ca	sh 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 & equ	lipment:	Moveable equipment	
D.				
		CERTIFICATION		
Pari Cor	thership including any accompa- poration declaration is binding		e State of California that the foregoing and all information hereon, orrect and complete to the best of my knowledge and belief. <b>This</b> artner.	
Oth NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE	
SIGN	IATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE	
NAM	E OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER	
PRE	PARER'S NAME AND ADDRESS (typed or printed)		TITLE	
DAY <sup>.</sup>	TIME TELEPHONE NUMBER E-MAIL ADDRESS			



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