EF-502-G-R06-0516-15000183-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

Kern County Assessor and Recorder

1115 Truxtun Avenue Bakersfield CA 93301-4639 (661) 868-3485

Laura Avila

File this statement by:

יייום		ANSFEREE		RECORDING DATA	
RUY	EK/IR	ANOFEREE			
MAIL	ING A	DDRESS		Date Recorded:	
				Document Number:	
SELI	ER/TI	RANSFEROR		Assessor's Identification Number: MB PG	PCL
				Phone Numbers:	FCL
MAIL	.ING A	DDRESS			
FIEL	D	LEASE		Buyer:	
				Seller:	
I N /I	DΩ	RTANT NOTICE		Sec: Twp: Rr	ng:
		requires any transferee acquiring an interest in real propert	ty or n	nanufactured home subject to local property taxa	ation and that is
		d by the county assessor, to file a Change in Ownership State			
		nt 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			
		policable to the new base year value reflecting the change in ow			
but	not	to exceed five thousand dollars (\$5,000) if the property is eligi	ible fo	the homeowners' exemption or twenty thousand	dollars (\$20,000)
		operty is not eligible for the homeowners' exemption if that fa			the assessment
		shall be collected like any other delinquent property taxes, an	_		
Α.	TR	ANSFER INFORMATION (Check the appropriate boxes to indi	icate ti	he method by which you acquired an interest in the	e 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,	☐ Yes ☐ No
۷.	ш	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?	☐ Yes ☐ No
3.	Ш	Inheritance. Transfer by will or intestate succession. 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.		Trade or exchange. The above described property has been	10.	tenancy interest?	☐ Yes ☐ No
		traded or exchanged for other real property or tangible personal property.	47		
			11.	Was this transfer between family members or related businesses?	☐ Yes ☐ No
5.	Ш	Merger or stock acquisition.			□ les □ l\0
0		Double Linterpool Angulation Man Land Man 400 margarity 5 "	18.	Was this document recorded to substitute a trustee	
6.	Ш	Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage		under a deed of trust, mortgage, or other similar document?	☐ Yes ☐ No
		transferred %.		document?	□ res □ No
		, ,	19.	Was this document recorded to create, assign,	
7.	Ш	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.	Ш	Gift.		If yes , is the trust: Revocable Irrevocable	
a		Life estate.	21	If the trust is irrevocable, is the transferor or the	
Э.	Ш	Life ostate.	۷1.	transferor's spouse or registered domestic	☐ Yes ☐ No
10.		Reconveyance (pay-off).		partner the sole present beneficiary?	103 110
		v ,		rame and some processing something in	
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 copy of	the trust
		(date)		agreement.	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



В.	PROPERTY INFORMATION (Complete each item as it appl	lies to this transaction.)					
1.	Seller's name and address:						
2.	Field name: Lease name	e: Parcel number:					
3.	Date sales agreement or letter of intent signed:	Effective transfer date:					
4.	Closing date: Recor	rding document: Number: Date:					
5.	Name, address and phone number of person with purchasing relative to the transaction:	g firm who is familiar with the transaction and would be available 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 & percentages:					
8.	Number of wells: Producing Injectio	on All idle Other					
9.	Productive acres in the parcel:	Total acres in the parcel:					
10.	Production rates at acquisition: Oil		b/d				
	Price received for oil and gas at acquisition: Oil	\$/b Gas	\$/mcf				
	Oil gravity:API Gas:		ft				
	Proved reserves: Developed: Oil	bbl Gas	mcf				
	Undeveloped: Oil —		mcf				
14.		analyses made to assist in establishing a purchase price?					
15. C .	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. c. The allocation to your company books of the total acquisite purchase price or transfer amount information. Terms: Total purchase price:	d amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such as the second of the s	ich as Ioan				
	. ,	Amount(s): Interest rate(s):					
	Source(s) of financing (bank, seller, etc.):						
D.	Purchase price allocated to: Fixed plant & equipment:	Moveable equipmentabout the sale or transfer which should be called to the attention of the Ass					
		CERTIFICATION					
Pari Cor Oth	nership including any accompanying statement declaration is binding on each and er						
NAM	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 EMPLOYER ID NUMBER					
PRE	PARER'S NAME AND ADDRESS (typed or printed)	TITLE					
DAY (TIME TELEPHONE NUMBER E-MAIL ADDRESS						

