CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

11. Creation or assignment of a lease:

12. Termination of a lease: _

File this statement by:



Office of the Assessor Kings County 1400 W. Lacey Blvd. Hanford, CA. 93230 559-852-2486 fax 559-582-2794

BUYER/TE	RANSFEREE	RECORDING	G DATA
		Date Recorded:	
MAILING	ADDRESS	Document Number:	
		Assessor's Identification Num	oer:
SELLER/T	RANSFEROR		PG PCL
MAILING	ADDRESS	Phone Numbers:	
		Buyer: ()	
FIELD	LEASE	Seller:	Λ
		Sec: Twp:	Rng:
-	requires any transferee acquiring an interest in real propert	or manufactured home subject to local proc	erty taxation, and that is
assesse	ed by the county assessor, to file a Change in Ownership State	ment with the County Recorder or Assessor.	Гhe C <mark>ha</mark> 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		
the esta	ate is probated, shall be filed at the time the inventory and appr	aisal is filed. The failure to file a Change in Ow	mership Statement within
	from the date of a written request by the Assessor results in a		
	oplicable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligi		
	operty is not eligible for the homeowners' exemption if that fai		
roll and	shall be collected like any other delinquent property taxes, an	be <mark>su</mark> bject to the same penalties for nonpayn	ient.
A. TR	ANSFER INFORMATION (Check the appropriate boxes to indi	ate the method by which you acquired an inter	est in the property.)
1. 🗌	Purchase (complete Sections B and C on the reverse side).	13. Was this transfer/addition solely between s	
2.	Land Sales Contract. A contract for the purchase of property	or registered domestic partners, divorce se	ttlement, 🗌 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.		
	Date of death	15. If you hold title to this property as a joint ter 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 tenancy interest?	nt Ves 🗌 No
	traded or exchanged for other real property or tangible personal		
	property.	17. Was this transfer between family members related businesses?	or Ves 🗌 No
5.	Merger or stock acquisition.		
6. 🗌	Partial interest transfer. Was less than 100 percent of the	 Was this document recorded to substitute a under a deed of trust, mortgage, or other si 	
0. 🗆	property transferred? If yes, indicate the percentage	document?	
	transferred%.		
7. 🗌	Foreclosure or trustee sale.	 Was this document recorded to create, ass or terminate a lender's interest in this property 	
ı. L			,
8.	Gift.	20. Has this property been transferred to a trus If yes , is the trust: Revocable	
• □	Life estate.	21. If the trust is irrevocable, is the transferor o	
э. Ц	LIIE ESIALE.	21. If the trust is irrevocable, is the transferor o transferor's spouse or registered domestic	
10. 🗌	Reconveyance (pay-off).	partner the sole present beneficiary?	

22. Does this property revert to the transferor in	
12 years or less? (Clifford Trust)	🗌 Yes 🗌 No

If you answered no to 21 or 22, attach a copy of the trust agreement.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)

EF-502-G-R06-0516-16000105-2 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 letter of intent signed	d:	E	ffective transfer date:				
4.	Closing date:	Recording docum	ent: Number:	Date:				
5.	Name, address and phone number of person relative to the transaction:			e transaction and would be available to answer questi	ons			
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			lidle Other				
9.	Productive acres in the parcel:		Total acre	es in the parcel:				
10.	Production rates at acquisition: Oil	b/d Gas		mcf/d Watert	b/d			
11.	Price received for oil and gas at acquisition:	Oil		_ \$/bGas\$/m	ncf			
12.	Oil gravity: API	Gas:	btu/mcf	Average producing depth:	ft			
			t	bl Gas	_ mcf			
	Undeveloped: Oil		k	bl Gas	– mcf			
14.				establishing a purchase price? 🔲 Yes 🔲 No				
15.	 a. If yes, please enclose copies of those appraisals, evaluations, cash flow projections or analyses. Please identify the analysis or appraisal most relied upon in establishing the purchase price. b. If no, please explain in Section D how the purchase price was determined. Please enclose a copy of the following: a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as loan agreements. b. A complete listing of all assets acquired and liabilities assumed in the acquisition, if not included in item 15a. Please list each lease, including wells and related equipment, separately. 							
C.	c. The allocation to your company books of the total acquisition price, by specific items. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION Terms: Total purchase price: Cash to seller:							
				Interest rate(s):				
	Source(s) of financing (bank, seller, etc.):		(inouni(3)					
				Moveshie aquinment				
D.	Purchase price allocated to: Fixed plant & equipment: Moveable equipment REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)							
		CERTIFIC	CATION					
Prop Part	nership including any accompt poration declaration is bindir	nder penalty of perjury under	the laws of the S ents, is true, corr	State of California that the foregoing and all information he rect and complete to the best of my knowledge and belief. iner.				
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed	1)		TITLE				
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT			DATE					
NAME OF ENTITY (typed or printed)			FEDERAL EMPLOYER ID NUMBER					
PREF	PARER'S NAME AND ADDRESS (typed or printed)			TITLE				
DAYT (IME TELEPHONE NUMBER E-MAIL ADDRESS							

