## CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



## Shelly Scott

Assessor-Recorder-County Clerk County of Marin CHANGE IN OWNERSHIP DIVISION P.O. Box C San Rafael, CA 94913 Phone: (415) 473-7231 Fax: (415) 473-6255 www.marincounty.gov

BUYER/TRANSFEREE	RECORDING DATA
	Date Recorded:
MAILING ADDRESS	Document Number:
SELLER/TRANSFEROR	Assessor's Identification Number:
	MB PG PCL
MAILING ADDRESS	Phone Numbers:
	Buyer: ()
FIELD	Seller:
<b>IMPORTANT NOTICE</b> The law requires any transferee acquiring an interest in real property or assessed by the county assessor, to file a Change in Ownership Statemen Statement must be filed at the time of recording or, if the transfer is not re that where the change in ownership has occurred by reason of death the the estate is probated, shall be filed at the time the inventory and apprais 90 days from the date of a written request by the Assessor results in a pe taxes applicable to the new base year value reflecting the change in owner	nt with the County Recorder or Assessor. The Change in Ownership corded, within 90 days of the date of the change in ownership, except statement shall be filed within 150 days after the date of death or, if al is filed. The failure to file a Change in Ownership Statement within nalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the ship of the real property or manufactured home, whichever is greater,
but not to exceed five thousand dollars (\$5,000) if the property is eligible if the property is not eligible for the homeowners' exemption if that failure roll and shall be collected like any other delinquent property taxes, and b	e t <mark>o file was not willf</mark> ul. This pe <mark>na</mark> lty will be added to the assessment
A. TRANSFER INFORMATION (Check the appropriate boxes to indicate	the method by which you acquired an interest in the property.)
1. Device the sections B and C on the reverse side).	3. Was this transfer/addition solely between spouses

2.	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession.	14.	or registered domestic partners, divorce settlement, etc.? . Was this transaction only a correction of the	_	∐ No
3. [	Inheritance. Transfer by will or intestate succession.     Date of death     Relationship to deceased	15.	name(s) of persons or entities holding title? If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?	☐ Yes	
4. [	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.		. Was th <mark>is transaction</mark> the termination of a joint tenancy interest? . Was this transfer between family members or	🗌 Yes	🗌 No
5. [	☐ Merger or stock acquisition.		related businesses?	Yes	🗌 No
6. [	Partial interest transfer. Was less than 100 percent of the property transferred? If <b>yes</b> , indicate the percentage transferred%.	18.	. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	☐ Yes	🗌 No
7. [	Foreclosure or trustee sale.	19.	. Was this document recorded to create, assign, or terminate a lender's interest in this property?	🗌 Yes	🗌 No
8. [	Gift.	20.	. Has this property been transferred to a trust? If <b>yes</b> , is the trust: Revocable Irrevocable	☐ Yes	🗌 No
9. [	Life estate.	21.	. If the trust is irrevocable, is the transferor or the		Π
10. 🛛	Reconveyance (pay-off).		transferor's spouse or registered domestic partner the sole present beneficiary?	∟ Yes	∐ No
11. L	Creation or assignment of a lease:	22.	Does this property revert to the transferor in 12 years or less? ( <i>Clifford Trust</i> )	🗌 Yes	🗌 No
12. [	Termination of a lease:		If you answered no to 21 or 22, attach a copy of t agreement.	he trust	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

## EF-502-G-R06-0516-21000383-2 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:		Effective transfer date:				
			r: Date:				
	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 cons	sultants used in connection with the tr	ansaction:				
7.	Interest acquired (please report decimal fraction Revenue interest: Working		0). r working interest owners & percentages:				
8.	Number of wells: Producing	Injection	All idle Other				
9.	Productive acres in the parcel:	Total	acres in the parcel:				
10.	Production rates at acquisition: Oil	b/d Gas	mcf/d Waterb/d				
11.	Price received for oil and gas at acquisition: 0	il	\$/b Gas\$/mcf				
12.	Oil gravity: API G	as:btu/m	cf Average producing depth:ft				
	•						
14.			t in establishing a purchase price?				
		isals, evaluations, cash flow projection e price.	ons or analyses. Please identify the analysis or appraisal				
	agreements. b. A complete listing of all assets acquired and		as well as other related agreements or contracts, such as loan if not included in item 15a. Please list each lease, including				
C.	wells and related equipment, separately. c. The allocation to your company books of the PURCHASE PRICE OR TRANSFER AMOUNT		ms.				
	Terms: Total purchase price:		ash 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	ipment:	Moveable equipment				
D.	<b>REMARKS</b> (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)						
	OWNERSHIP TYPE	CERTIFICATION					
Prop Part	orietorship I certify (or declare) und including any accompany declaration is binding		the State of California that the foregoing and all information hereon, correct and complete to the best of my knowledge and belief. <b>This</b> partner.				
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE				
	ATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE				
NAM	E OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER				
PREF	PARER'S NAME AND ADDRESS (typed or printed)		TITLE				
DAY1 (	TIME TELEPHONE NUMBER E-MAIL ADDRESS						

