CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



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BUYER/TRANSFEREE	RECORDING DATA			
	Date Recorded:			
MAILING ADDRESS	Document Number:			
	Assessor's Identification Number:			
SELLER/TRANSFEROR	MB PG PCL			
MAILING ADDRESS	Phone Numbers:			
FIELD	Buyer: () Seller: ()			
	Sec: Twp: Rng:			
The law requires any transferee acquiring an interest in real property or manufact assessed by the county assessor, to file a Change in Ownership Statement with the	County Recorder or Assessor. The Change in Ownership			
Statement must be filed at the time of recording or, if the transfer is not recorded, wit that where the change in ownership has occurred by reason of death the statement	t shall be filed within 150 days after the date of death or, if			
the estate is probated, shall be filed at the time the inventory and appraisal is filed.				
90 days from the date of a written request by the Assessor results in a penalty of eith				
taxes applicable to the new base year value reflecting the change in ownership of the				
but not to exceed five thousand dollars (\$5,000) if the property is eligible for the hon				
if the property is not eligible for the homeowners' exemption if that failure to file was	s not willful. This penalty 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.)

roll and shall be collected like any other delinquent property taxes, and be subject to the same penalties for nonpayment.

1. 2. 3.	 Purchase (complete Sections B and C on the reverse side). Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession. Inheritance. Transfer by will or intestate succession. 	14.	Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement, etc.? Was this transaction only a correction of the name(s) of persons or entities holding title?	Yes Yes	_
э. Ш	Date of death Relationship to deceased	1 5.	If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?	🗌 Yes	🗌 No
4.	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.		Was this transaction 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 yes , 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 yes , is the trust: Revocable Irrevocable	☐ Yes	🗌 No
9. 🗌	Life estate.	21.	If the trust is irrevocable, is the transferor or the		
10. 🗌	Reconveyance (pay-off).		transferor's spouse or registered domestic partner the sole present beneficiary?	∐ Yes	∐ No
11. 🗌	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: (date)		<i>If you answered no to 21 or 22, attach a copy of t agreement.</i>	he trust	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

EF-502-G-R06-0516-35000111-2 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: _		Effec	tive transfer date:					
4.	Closing date:	Recording docum	nent: Number:	Date:					
	Name, address and phone number of person wit relative to the transaction:	-							
6.	Name, address, and phone number of any const	ultants used in connection	on with the transaction	on:					
7.	Interest acquired (please report decimal fraction: Revenue interest: Working			g interest owners & percentages:					
8.	Number of wells: Producing	Injection	All idle	e Other					
9.	Productive acres in the parcel:		Total acres in	the parcel:					
10.	Production rates at acquisition: Oil	b/d Gas	s	mcf/d Water	b/d				
11.	Price received for oil and gas at acquisition: Oi		\$/b	Gas	\$/mcf				
12.	Oil gravity: API Ga	as:	btu/mcf Ave	erage producing depth:	ft				
	Proved reserves: Developed: Oil				mcf				
	Undeveloped: Oil —				mcf				
14.	Were appraisals, evaluations, cash flow projection								
	 a. If yes, please enclose copies of those apprain most relied upon in establishing the purchase b. If no, please explain in Section D how the purchase enclose a copy of the following: a. The sales agreement or contract including all 	isals, evaluations, cash t e price. Irchase price was deterr	flow projections or a nined.	nalyses. Please identify the analysis o	r appraisal				
C.	 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. 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: 								
	Production and/or conventional loan(s):		Amount(s):	Interest rate(s	s):				
	Source(s) of financing (bank, seller, etc.):								
	Purchase price allocated to: Fixed plant & equ		М	oveable equipment					
D.	REMARKS (Please include below any additiona								
		CERTIFI	CATION						
Prop Part	nership including any accompany poration declaration is binding		nents, is true, correct	e of California that the foregoing and all ir and complete to the best of my knowledg					
	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 NUMBI	ER				
PREI	PARER'S NAME AND ADDRESS (typed or printed)			TITLE					
DAY1 (TIME TELEPHONE NUMBER E-MAIL ADDRESS								

