EF-502-G-R06-0516-36000270-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Josie Gonzales Assessor-Recorder-County Clerk

County of San Bernardino Assessor's Office 222 W. Hospitality Lane - 4th Floor San Bernardino, CA 92415-0311 www.sbcounty.gov/arc

Phone: (909) 387-8307 Toll Free: (877) 885-7654

| BUYI | ER/TR | ANSFEREE | _ | RECORDING DATA | | | |
|--|--------|--|----------|--|------------------|--|--|
| | | | | Date Recorded: | | | |
| MAILING ADDRESS | | | | Document Number: | | | |
| | | | | Assessor's Identification Number: | | | |
| SELL | .ER/TF | RANSFEROR | | MB PG | PCL | | |
| MAIL | ING A | DDRESS | | Phone Numbers: | | | |
| | | | | Buyer: () | | | |
| FIEL | D | LEASE | | Seller () | | | |
| | | | | | | | |
| IM | PO | RTANT NOTICE | | Sec: Rr | ng: | | |
| | | requires any transferee acquiring an interest in real propert | | | | | |
| | | d by the county assessor, to file a Change in Ownership State | | | | | |
| Statement must be filed at the time of recording or, if the transfer is not recorded, within 90 days of the date of the change in ownership, except that where the change in ownership has occurred by reason of death the statement shall be filed within 150 days after the date of death or, if | | | | | | | |
| the | esta | te is probated, shall be filed at the time the inventory and appr | raisal i | s filed. The failure to file a Change in Ownership | Statement within | | |
| | | from the date of a written request by the Assessor results in a | | | | | |
| taxes applicable to the new base year value reflecting the change in ownership of the real property or manufactured home, whichever is greater, but not to exceed five thousand dollars (\$5,000) if the property is eligible for the homeowners' exemption or twenty thousand dollars (\$20,000) | | | | | | | |
| if th | e pr | operty is not eligible for the hom <mark>eowners' e</mark> xemption <mark>if</mark> that fa | ilure to | file was not wi <mark>llf</mark> ul. This pe <mark>na</mark> lty will be add <mark>ed</mark> to | | | |
| roll | and | shall be collected like any <mark>other d</mark> elinque <mark>nt</mark> property taxes, an | d be s | ubject to the s <mark>am</mark> e penalties for nonpayment. | | | |
| Α. | TR | ANSFER INFORMATION (Check the appropriate boxes to indi | cate th | ne 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 | | Land Calca Contract A system for the new base of wareh | | or registered domestic partners, divorce settlement, | ☐ Yes ☐ No | | |
| 2. | Ш | Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes | | etc.? | | | |
| | | possession. | 14. | Was this transaction only a correction of the | | | |
| • | | Inhadan Tarafalan ili adda ta | | 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. | Ш | Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal | | tenancy interest? | ☐ Yes ☐ No | | |
| | | property. | 17 | Was this transfer between family members or | | | |
| _ | | | 17. | related businesses? | ☐ Yes ☐ No | | |
| 5. | Ш | Merger or stock acquisition. | 10 | | | | |
| 6. | П | Partial interest transfer. Was less than 100 percent of the | 10. | Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar | | | |
| ٥. | | property transferred? If yes , indicate the percentage | | document? | ☐ Yes ☐ No | | |
| | | transferred %. | 10 | Was this document recorded to create assign | | | |
| 7 | | Foreclosure or trustee sale. | 13. | Was this document recorded to create, assign, or terminate a lender's interest in this property? | ☐ Yes ☐ No | | |
| 1. | ш | i diddiosale di tiustee sale. | | | | | |
| 8. | | Gift. | 20. | Has this property been transferred to a trust? If yes , is the trust: Revocable Irrevocable | ☐ Yes ☐ No | | |
| | | | | | | | |
| 9. | Ш | Life estate. | 21. | If the trust is irrevocable, is the transferor or the | ☐ Yes ☐ No | | |
| 10. | П | Reconveyance (pay-off). | | transferor's spouse or registered domestic | □ Yes □ No | | |
| 10. | | necontragation (pay-on). | | partner the sole present beneficiary? | | | |
| 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 t | the trust | | |
| | | (date) | | agreement. | | | |

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



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| B. | PROPERTY INFORMATION (Complete each item as it appl | es 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: | | | | |
| 4. | Closing date: Recor | ding document: Number: Date: | | | | |
| 5. | 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 consultants used | n connection with the transaction: | | | | |
| 7. | Interest acquired (please report decimal fractions out of total; e.g., 0.875 out of 1.000). | | | | | |
| | | Other working interest owners & percentages: | | | | |
| 8. | Number of wells: Producing Injection | n All idle Other | | | | |
| | | Total acres in the parcel: | | | | |
| 10. | | b/d Gasb/d | | | | |
| | Price received for oil and gas at acquisition: Oil | \$/b Gas \$/mcf | | | | |
| | Oil gravity: API Gas: | btu/mcf Average producing depth:ft | | | | |
| | Proved reserves: Developed: Oil | | | | | |
| | Undeveloped: Oil | | | | | |
| 14. | | analyses made to assist in establishing a purchase price? | | | | |
| | | ons, cash flow projections or analyses. Please identify the analysis or appraisal | | | | |
| 15. | 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 $% \left\{ 1,2,\ldots ,n\right\}$ | | | | |
| | agreements. | | | | | |
| | A complete listing of all assets acquired and liabilities ass wells and related equipment, separately. | umed in the acquisition, if not included in item 15a. Please list each lease, including | | | | |
| | c. The allocation to your company books of the total acquisi | ion price, by specific items. | | | | |
| C. | PURCHASE PRICE OR TRANSFER AMOUNT INFORMATI | PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION | | | | |
| | Terms: Total purchase price: | Cash 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 & equipment: | Moveable equipment | | | | |
| D. | REMARKS (Please include below any additional information | about the sale or tran <mark>sfer which s</mark> hould be called to the attention of the Assessor.) | | | | |
| | | | | | | |
| | | | | | | |
| | | CERTIFICATION | | | | |
| Par | including any accompanying statement declaration is binding on each and | nerjury under the laws of the State of California that the foregoing and all information hereon, ats or documents, is true, correct and complete to the best of my knowledge and belief. This every co-owner and/or partner. | | | | |
| _ | E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed) | TITLE | | | | |
| | | | | | | |
| SIGN | IATURE OF ASSESSEE OR AUTHORIZED AGENT | DATE | | | | |
| NIANA | E OF ENTITY (hand as printed) | FEDERAL EMPLOYED ID MUMDER | | | | |
| 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 | | | | | |

