CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

11. Creation or assignment of a lease:

12. Termination of a lease: _

File this statement by:



Joaquin Torres Assessor-Recorder Office of the Assessor-Recorder 1 Dr. Carlton B. Goodlett Place - Room 190 San Francisco, CA 94102 www.sfassessor.org (415) 554-5596

BUYER/T	RANSFEREE	RECORDING DATA
MAILING	ADDRESS	Date Recorded:
		Document Number:
SELLER/1	RANSFEROR	Assessor's Identification Number:
		MB PG PCL
MAILING	ADDRESS	Phone Numbers:
The lav		Buyer: Seller: Seller: Rng: Rng: Seller: Sec: Twp: Rng: Rng: Sec: Sec: Sect to local property taxation, and that is ament with the County Recorder or Assessor. The Change in Ownership
that wh the esta 90 days taxes a but not if the p	here the change in ownership has occurred by reason of death ate is probated, shall be filed at the time the inventory and appr s from the date of a written request by the Assessor results in a pplicable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligi	t recorded, within 90 days of the date of the change in ownership, except the statement shall be filed within 150 days after the date of death or, if raisal is filed. The failure to file a Change in Ownership Statement within penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the mership of the real property or manufactured home, whichever is greater, ble for the homeowners' exemption or twenty thousand dollars (\$20,000) ilure to file was not willful. This penalty will be added to the assessment of be subject to the same penalties for nonnavment.
		cate the method by which you acquired an interest in the property.)
1. 🗌 2. 🗌	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	 13. Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement, Yes No etc.? 14. Was this transaction only a correction of the
3.	possession. Inheritance. Transfer by will or intestate succession.	name(s) of persons or entities holding title?
	Date of death Relationship to deceased	15. 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	16. Was this transaction the termination of a joint tenancy interest?
5.	property. Merger or stock acquisition.	17. Was this transfer between family members or related businesses?
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?
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? ☐ Yes ☐ No If yes , is the trust: ☐ Revocable ☐ Irrevocable
9.	Life estate.	21. If the trust is irrevocable, is the transferor or the 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-R06-0516-38000209-2 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 lette	er of intent signed:		Effective transfer date:				
4.	Closing date:	Recording do	cument: 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 n	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	Injection	A	All idle Other				
9.	Productive acres in the parce	əl:	Total ac	pres in the parcel:				
10.	Production rates at acquisitio	on: Oilb/d	Gas	mcf/d Waterb/d				
11.	Price received for oil and gas	at acquisition: Oil		\$/b_Gas\$/mcf				
12.	Oil gravity:	API Gas:	btu/mcf	f Average producing depth:ft				
		eloped: Oil						
	Undeve	eloped: Oil		_ bbl Gasmcf				
14.			s made to assist in	n establishing a purchase price? 🔲 Yes 🔲 No				
15. C.	 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. 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):							
D.	Source(s) of financing (bank, seller, etc.):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.)							
		CERT	IFICATION					
Part	nership inclusion inclusico inclusico inclusico inclusico inclusico inclusico inclusio	rtify (or declare) under penalty of perjury u	nder the laws of the ocuments, is true, co	e State of California that the foregoing and all information hereon, orrect and complete to the best of my knowledge and belief. This artner.				
	E OF ASSESSEE OR AUTHORIZED AG	GENT (typed or printed)		TITLE				
SIGN	ATURE OF ASSESSEE OR AUTHORIZ	ZED AGENT		DATE				
NAM	E OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER					
PREI	PARER'S NAME AND ADDRESS (typed	or printed)	TITLE					
DAY ⁻	TIME TELEPHONE NUMBER	E-MAIL ADDRESS						

