CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Office of Tom J. Bordonaro, Jr. San Luis Obispo County Assessor

Yes No

🗌 Yes 🗌 No

Yes No

🗌 Yes 🗌 No

County Government Center 1055 Monterey Street, Suite D360 San Luis Obispo, CA 93408 Telephone (805) 781-5643 Fax: (805) 781-5641 Email: Assessor@co.slo.ca.us Web Site: slocounty.ca.gov/assessor

BUYER/T	RANSFEREE	RECORDING DATA		
	4222500	Date Recorded:		
MAILING	ADDRESS	Document Number:		
SELLER/	TRANSFEROR	Assessor's Identification Number:		
		MB PG	PCL	
MAILING	ADDRESS	Phone Numbers:		
		Buyer: ()		
FIELD	LEASE	Seller:		
			I:	
IMPC		Sec Twp Riig		
	w requires any transferee acquiring an interest in real propert			
	ed by the county assessor, to file a Change in Ownership State ent must be filed at the time of recording or, if the transfer is no			
	here the change in ownership has occurred by reason of death			
	ate is probated, shall be filed at the time the inventory and appr			
90 days	s from the date of a written request by the Assesso <mark>r re</mark> sults in a	a penalty of either: (1) one hundred dollars (\$100); or (2) 10) percent of the	
	pplicable to the new base year value reflecting the change in ow			
	t to exceed five thousand dollars (\$5,000) if the property is eligit roperty is not eligible for the homeowners' exemption if that fai			
	d shall be collected like any other delinquent property taxes, an		ne assessment	
A. TF	RANSFER INFORMATION (Check the appropriate boxes to indi	icate the method by which you acquired an interest in the r	property.)	
_	1		(ioporty.)	
1. 🗆	Purchase (complete Sections B and C on the reverse side).	13. Was this transfer/addition solely between spouses	🗌 Yes 🗌 No	
2.	Land Sales Contract. A contract for the purchase of property	or registered domestic partners, divorce settlement, etc.?		
	in which the seller retains legal title to it after the buyer takes			
	possession.	14. Was this transaction only a correction of the	Yes No	
3.	Inheritance. Transfer by will or intestate succession.	name(s) of persons or entities holding title?		
э. ∟	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.	Trade or exchange. The above described property has been		🗌 Yes 🗌 No	
	traded or exchanged for other real property or tangible personal			
	property.	17. Was this transfer between family members or		
5.	Merger or stock acquisition.	related businesses?	🗌 Yes 🗌 No	
		18. Was this document recorded to substitute a trustee		
6.	Partial interest transfer. Was less than 100 percent of the	under a deed of trust, mortgage, or other similar		
	property transferred? If yes, indicate the percentage	document?	🗌 Yes 📙 No	
	transferred%.	19. Was this document recorded to create, assign,		

- 7. Foreclosure or trustee sale.
- 8. Gift.
- 9. Life estate.
- 10. Reconveyance (pay-off).

12. Termination of a lease:

- 11. Creation or assignment of a lease:
- (date)
 12 years or less? (Clifford Trust)
 Yes

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

(date)

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

or terminate a lender's interest in this property?

If **yes**, is the trust: Revocable Irrevocable

20. Has this property been transferred to a trust?

21. If the trust is irrevocable, is the transferor or the

transferor's spouse or registered domestic

partner the sole present beneficiary?22. Does this property revert to the transferor in



EF-502-G-R06-0516-40000111-2 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 addres	SS:			
2.	Field name:	eld name: Parcel number:			
3.	Date sales agreement or letter of intent signed: Effective transfer date:		Effective transfer date:		
4.	Closing date:	Recording	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 in connection with the transaction:				
7. Interest acquired (please report decimal fractions out of total; e.g., 0.875 out of 1.000).			0.875 out of 1.000).		
	Revenue interest:	Working interest:	Other working interest owners & percentages:		
8.	Number of wells: Produ	cing Injection	All idle Other		
	Productive acres in the pa		Total acres in the parcel:		
	Production rates at acqui	sition: Oilb/c	Gasb/d		
		gas at acquisition: Oil	\$/b_Gas\$/mcf		
	Oil gravity:		btu/mcf Average producing depth:ft		
	Proved reserves:		bbl Gasmcf		
		developed: Oil			
14			ses made to assist in establishing a purchase price? Yes No		
15. C. D.	 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: Production and/or conventional loan(s): Source(s) of financing (bank, seller, etc.): Purchase price allocated to: Fixed plant & equipment: Moveable 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.) 				
		CEI	RTIFICATION		
Prop Part	nership		v under the laws of the State of California that the foregoing and all information hereon, documents, is true, correct and complete to the best of my knowledge and belief. This v co-owner and/or partner.		
NAM	E OF ASSESSEE OR AUTHORIZE	TITLE			
	ATURE OF ASSESSEE OR AUTHO	DATE			
NAM	E OF ENTITY (typed or printed)	FEDERAL EMPLOYER ID NUMBER			
	PARER'S NAME AND ADDRESS (t)	TITLE			
DAY1 (TIME TELEPHONE NUMBER	E-MAIL ADDRESS			

