## CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

transferred \_\_\_\_\_\_%.

11. Creation or assignment of a lease:

7. Foreclosure or trustee sale.

10. Reconveyance (pay-off).

12. Termination of a lease:

8. Gift.

9. Life estate.

File this statement by:



Kenneth L. Brown County of Tehama Assessor 444 Oak Street - Room B P. O. Box 428 Red Bluff, CA 96080 (530) 527-5931 Fax (530) 529-4019

BUYER/TRANSFEREE		RECORDING DATA	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	a:		
the est 90 day taxes a but not if the p	here the change in ownership has occurred by reason of death tate 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 applicable to the new base year value reflecting the change in ow t to exceed five thousand dollars (\$5,000) if the property is eligib property is not eligible for the homeowners' exemption if that fai d shall be collected like any other delinquent property taxes, an	raisal is filed. The failure to file a Change in Ownership S penalty of either: (1) one hundred dollars (\$100); or (2) 1 mership of the real property or manufactured home, which ble for the homeowners' exemption or twenty thousand d ilure to file was not willful. This penalty will be added to t	tatement within 0 percent of the never is greater, lollars (\$20,000)		
A. TI	RANSFER INFORMATION (Check the appropriate boxes to indic	cate the method by which you acquired an interest in the p	property.)		
1. 🗌	<b>Purchase</b> (complete Sections B and C on the reverse side).	13. Was this transfer/addition solely between spouses			
2.	<b>Land Sales Contract.</b> A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession.	or registered domestic partners, divorce settlement, etc.? 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?	Yes No		
э. Ш	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.	<b>Trade or exchange.</b> The above described property has been traded or exchanged for other real property or tangible personal property.	16. Was this transaction the termination of a joint tenancy interest?	Yes No		
		17. Was this transfer between family members or			
		related husinesses?			
5.	Merger or stock acquisition.	related businesses?	Yes No		

- 19. Was this document recorded to create, assign, or terminate a lender's interest in this property?
  - 20. Has this property been transferred to a trust? If **yes**, is the trust: Revocable Irrevocable
  - 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	_	_
	12 years or less? (Clifford Trust)	🗌 Yes	L No

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

Yes No

Yes No

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)

## EF-502-G-R06-0516-52000060-2 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:					
4.	Closing date:	Recording docum	ient: 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). Revenue interest: Working interest: Other 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:	Oilb/d Gas	s	mcf/d Waterb/d				
	Price received for oil and gas at a		\$/b G	Gas\$/mcf				
12.	Oil gravity:	API Gas:	btu/mcf Averag	e producing depth:ft				
	Proved reserves: Develope			as mcf				
	Undevelope		bbl Ga	asmcf				
14.				ning a purchase price?				
15.	<ul> <li>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.</li> <li>b. If no, please explain in Section D how the purchase price was determined.</li> <li>i. Please enclose a copy of the following: <ul> <li>a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as loan agreements.</li> <li>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.</li> </ul> </li> </ul>							
C.	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):				
	Source(s) of financing (bank, sell		(inouni(o).					
			Movo	able equipment				
D.	Purchase price allocated to: Fixed plant & equipment: Moveable equipment <b>REMARKS</b> (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)							
		CERTIFIC	CATION					
Prop Part	nership including	(or declare) under penalty of perjury under	r the laws of the State of ( nents, is true, correct and	California that the foregoing and all information hereon, complete to the best of my knowledge and belief. <b>This</b>				
	E OF ASSESSEE OR AUTHORIZED AGENT	(typed or printed)		TITLE				
SIGN	ATURE OF ASSESSEE OR AUTHORIZED A	GENT		DATE				
NAME OF ENTITY (typed or printed)				FEDERAL EMPLOYER ID NUMBER				
PREF	PARER'S NAME AND ADDRESS (typed or pri	inted)		TITLE				
DAYT	IME TELEPHONE NUMBER E-M	IAILADDRESS		1				

