## **CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY**

File this statement by:



## **Kaenan Whitman Tuolumne County Assessor - Recorder** 2 South Green Street, Third Floor Sonora, CA 95370 Phone: (209) 533-5535 Fax: (209) 533-5674 Email: assessor@tuolumnecounty.ca.gov

BUYER/TR	ANSFEREE	RECORDING DATA
		Date Recorded:
MAILING A	DDRESS	Document Number:
		Assessor's Identification Number:
SELLER/TR	RANSFEROR	MB PG PCL
MAILING A	DDRESS	Phone Numbers:
FIELD	LEASE	Buyer: () Seller:
-		Sec: Twp: Rng: y or manufactured home subject to local property taxation, and that
Stateme that whe the esta 90 days taxes ap but not if the pr roll and	ent must be filed at the time of recording or, if the transfer is not ere the change in ownership has occurred by reason of death te is probated, shall be filed at the time the inventory and appr from the date of a written request by the Assessor results in a oplicable to the new base year value reflecting the change in own to exceed five thousand dollars (\$5,000) if the property is eligit operty is not eligible for the homeowners' exemption if that fai shall be collected like any other delinquent property taxes, and	
A. TR	ANSFER INFORMATION (Check the appropriate boxes to indic	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	13. Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement, Yes etc.?
	in which the seller retains legal title to it after the buyer takes possession.	14. Was this transaction only a correction of the name(s) of persons or entities holding title?
3. 🔟	Inheritance. Transfer by will or intestate succession. 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?
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. 🗌	<b>Partial interest transfer.</b> Was less than 100 percent of the property transferred? If <b>yes</b> , indicate the percentage	18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?
7. 🗌	transferred %. Foreclosure or trustee sale.	19. Was this document recorded to create, assign, or terminate a lender's interest in this property? □ Yes □
8. 🗌	Gift.	20. Has this property been transferred to a trust? ☐ Yes ☐ If <b>yes</b> , 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).	

12. Termination of a lease:

12 years or less? (Clifford Trust)	🗌 Yes 🗌 No					
If you answered no to 21 or 22, attach a copy of the trust agreement.						

partner the sole present beneficiary?

22. Does this property revert to the transferor in

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)

## EF-502-G-R06-0516-55000203-2 BOE-502-G (P2) REV. 6 (05-16)

## B. **PROPERTY INFORMATION** (Complete each item as it applies to this transaction.)

3. D 4. C	Date sales agreement or letter of intent si	igned:	Parcel number: _ Effective transfer date:			
4. C	Closing date:	•	Effective transfer date:			
	•					
	•	Recording document: Numbe	r: Date:			
	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. N	Name, address, and phone number of any consultants used in connection with the transaction:					
7. Ir	nterest acquired (please report decimal fi	fractions out of total; e.g., 0.875 out of 1.000	)).			
	Revenue interest: Working interest: Other working interest owners & percentages:					
8. N	lumber of wells: Producing		All idle Other			
	Productive acres in the parcel:		acres in the parcel:			
10. P	roduction rates at acqui <mark>siti</mark> on: Oil	b/d Gas	mcf/d Waterb/d			
	rice received for oil an <mark>d g</mark> as at ac <mark>qu</mark> isitic		\$/b_ Gas\$/mcf			
12. O	Dil gravity: A	NPI Gas: btu/m	cf Average producing depth: ft			
		il	bbl Gasmcf			
	Undeveloped: Oi	il	bbl Gasmcf			
14. W			in establishing a purchase price? 🔲 Yes 🔲 No			
b. 15. Pl a. b. c. <b>C. P</b> l Te	<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>5. 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> <li>c. The allocation to your company books of the total acquisition price, by specific items.</li> </ul> </li> <li>PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION <ul> <li>Terms: Total purchase price:</li> <li>Cash to seller:</li> </ul> </li> </ul>					
P	roduction and/or conventional loan(s): _	Amount(s): _	Interest rate(s):			
S	ource(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.)					
		CERTIFICATION				
	rship   including any acc ration   declaration is but	re) under penalty of perjury under the laws of t	he State of California that the foregoing and all information hereon, correct and complete to the best of my knowledge and belief. <b>This</b> partner.			
	DF ASSESSEE OR AUTHORIZED AGENT (typed or p	printed)	TITLE			
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT			DATE			
NAME OF ENTITY (typed or printed)			FEDERAL EMPLOYER ID NUMBER			
PREPAR	RER'S NAME AND ADDRESS (typed or printed)	TITLE				
DAYTIME (	E TELEPHONE NUMBER E-MAIL ADDRI	ESS				

