EF-502-G-R06-0516-17000181-1 BOE-502-G (P1) REV. 6 (05-16)

File this statement by:

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

County Assessor-Recorder Lake County Courthouse 255 North Forbes Street Lakeport, CA 95453

Douglas W. Wacker

Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293

Fax: 707-263-3703

BUYER/TRANSFEREE				RECORDING DATA				
			Date Recorded:					
MAILING ADDRESS			Document Numb					
			Assessor's Identi	ification Number:				
SELLER/TRANSFEROR			1	MB PG	PCL			
MAILING ADDRESS			Phone Numbers:					
			Buyer:					
FIELD	LEASE		Seller:					
		_		Twp:	ng:			
IMPORTANT NO								
	an <mark>sfe</mark> ree acq <mark>uir</mark> ing an i <mark>nte</mark> rest in real propert assessor, to file a Change in Ownership State							
	at the time of recording or, if the transfer is no							
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								
	hall be filed at the time the inventory and appropriate a written request by the Assessor results in a							
90 days from the date of a written request by the Assessor results in a penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the taxes applicable to the new base year value reflecting the change in ownership of the real property or manufactured home, whichever is greater,								
	ousand dollars (\$5,000) if the property is eligi							
	gible for the homeowners' exemption if that failed like any other delinquent property taxes, an				o the assessment			
	MATION (Check the appropriate boxes to indi				e property.)			
1. Purchase (comp	plete Sections B and C on the reverse side).	13. Was	this transfer/addition sol	ely between spouses				
		or re	gistered domestic partne		☐ Yes ☐ No			
	Itract. A contract for the purchase of property er retains legal title to it after the buyer takes	etc.?	?					
possession.	ir retains legal title to it after the buyer takes		th <mark>is</mark> transaction only a					
3. Inheritance. Tra	nsfer by will or intestate succession.	nam	e(s) of persons or entities	s holding title?	☐ Yes ☐ No			
Date of death	Tisler by will of linestate succession.	-	u hold title to this property	•				
Relationship to d	eceased	is the	e seller or transferor also	a joint tenant?	☐ Yes ☐ No			
4. Trade or exchar	nge. The above described property has been	16. Was	this transaction the term	ination of a joint				
	nged for other real property or tangible personal	tena	ncy interest?		☐ Yes ☐ No			
property.		17. Was	this transfer between far	nily members or				
5. Merger or stock	acquisition.	relat	ed businesses?		☐ Yes ☐ No			
		18. Was	this document recorded	to substitute a trustee				
	transfer. Was less than 100 percent of the		er a deed of trust, mortga	ge, or other similar				
property transfer transferred	red? If yes , indicate the percentage	docu	ıment?		☐ Yes ☐ No			
_			this document recorded	, ,				
7. Foreclosure or	trustee sale.	or te	rminate a lender's interes	st in this property?	☐ Yes ☐ No			
8. Gift.			this property been transfees, is the trust: Revo		Yes No			
9. Life estate.		_	e trust is irrevocable, is th					
J. LIIE ESIALE.			sferor's spouse or registe		☐ Yes ☐ No			
10. Reconveyance	(pay-off).		ner the sole present bene		55 110			
11. Creation or assi	ignment of a lease:	22. Does	s this property revert to th	ne transferor in				
5.500.011 01 0351	(date)		ears or less? (Clifford Tru		☐ Yes ☐ No			
12 Termination of a	a loaso:	16	ou anawarad na ta 21 au	. 22 offeeb e eenveef	41 44			

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

agreement.



В.	PROPERTY INFORMATION (Complete each item as it appl	lies to this transaction.)			
1.	Seller's name and address:				
2.	Field name: Lease name	e: Parcel number:	Parcel number:		
3.	Date sales agreement or letter of intent signed:	Effective transfer date:			
4.	Closing date: Recor	rding document: Number: Date:			
5.	Name, address and phone number of person with purchasing relative to the transaction:	g firm who is familiar with the transaction and would be available to answer	questions		
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 Injectio	on All idle Other			
9.	Productive acres in the parcel:	Total acres in the parcel:			
10.	Production rates at acquisition: Oil		b/d		
	Price received for oil and gas at acquisition: Oil	\$/b Gas	\$/mcf		
	Oil gravity:API Gas:		ft		
	Proved reserves: Developed: Oil	bbl Gas	mcf		
	Undeveloped: Oil —		mcf		
14.		analyses made to assist in establishing a purchase price?			
15. C .	most relied upon in establishing the purchase price. b. If no, please explain in Section D how the purchase price. Please enclose a copy of the following: a. The sales agreement or contract including all exhibits and agreements. b. A complete listing of all assets acquired and liabilities ass wells and related equipment, separately. c. The allocation to your company books of the total acquisite purchase price or transfer amount information. Terms: Total purchase price:	d amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such as the second of the s	ich as Ioan		
	. ,	Amount(s): Interest rate(s):			
	Source(s) of financing (bank, seller, etc.):				
D.	Purchase price allocated to: Fixed plant & equipment:	Moveable equipmentabout the sale or transfer which should be called to the attention of the Ass			
		CERTIFICATION			
Pari Cor Oth	nership including any accompanying statement declaration is binding on each and er				
NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	TITLE			
SIGN	ATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE			
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				

