CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:

10. Reconveyance (pay-off).

12. Termination of a lease: _

11. Creation or assignment of a lease:



Douglas W. Wacker County Assessor-Recorder

Lake County Courthouse 255 North Forbes Street Lakeport, CA 95453 Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293 Fax: 707-263-3703

BUYER/TRANSFEREE	RECORDING DATA
MAILING ADDRESS	Date Recorded:
	Document Number:
SELLER/TRANSFEROR	Assessor's Identification Number:
	MB PG PCL
MAILING ADDRESS	Phone Numbers:
	Buyer: ()
FIELD	Seller:
	Sec: Twp: Rng:
IMPORTANT NOTICE	
	/ or manufactured home subject to local property taxation, and that is ment with the County Recorder or Assessor. The Change in Ownership
	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
	aisal 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 nership of the real property or manufactured home, whichever is greater,
	ble for the homeowners' exemption or twenty thousand dollars (\$20,000)
	lure to file was not willful. This penalty will be added to the assessment
roll and shall be collected like any other delinquent property taxes, and	
A. TRANSFER INFORMATION (Check the appropriate boxes to indic	cate the method by which you acquired an interest in the property.)
1. Purchase (complete Sections B and C on the reverse side).	13. Was this transfer/addition solely between spouses
1. Purchase (complete Sections B and C on the reverse side).	or registered domestic partners, divorce settlement,
2. Land Sales Contract. A contract for the purchase of property	etc.?
in which the seller retai <mark>ns</mark> legal title <mark>to</mark> it a <mark>fte</mark> r the buyer <mark>tak</mark> es	
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	15. If you hold title to this property as a joint tenant,
Relationship to deceased	is the seller or transferor also a joint tenant? \Box Yes \Box No
	16. Was this transaction the termination of a joint
 Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal 	tenancy interest?
property.	17. Was this transfer between family members or
	related businesses?
5. Merger or stock acquisition.	
	18. Was this document recorded to substitute a trustee
6. Derived 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 transferred%.	document?
	19. Was this document recorded to create, assign,
7. D Foreclosure or trustee sale.	or terminate a lender's interest in this property?
_	20. Has this property been transferred to a trust?
8. Gift.	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

(date) 22. Does this property revert to the transferor in 12 years or less? (*Clifford Trust*)

partner the sole present beneficiary?

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

🗌 Yes 🗌 No

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

EF-502-G-R06-0516-17000103-2 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 sign	ed:	Effective transfer date:
4.	Closing date:	Recording document: Number:	Date:
5.	•	n with purchasing 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	Injection	All idle Other
	Productive acres in the parcel:	Total au	cres in the parcel:
10.	Production rates at acquisition: Oil		
	Price received for oil and gas at acquisition:		\$/b_ Gas\$/mcf
			f Average producing depth:ft
	Proved reserves: Developed: Oil		_ bbl _ Gas mcf
14.			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. 5. 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. 		
	Source(s) of financing (bank, seller, etc.):		
D.	Purchase price allocated to: Fixed plant &	equipment:	Moveable equipment r which should be called to the attention of the Assessor.)
		CERTIFICATION	
Par	including any accon poration declaration is bind		e State of California that the foregoing and all information hereon, orrect and complete to the best of my knowledge and belief. This artner.
NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printe	ed)	TITLE
SIGN	IATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE
NAME OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER	
PREPARER'S NAME AND ADDRESS (typed or printed)		TITLE	
DAY" (TIME TELEPHONE NUMBER E-MAIL ADDRESS	S	

