EF-502-G-R06-0516-22000196-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY



Vincent P. Kehoe County of Mariposa Assessor/Recorder

4982 10th St P.O. Box 35 Mariposa, CA 95338 Ph: (209) 966-2332 Fax: (209) 966-5719

0.272	0,1011101	
File this st	atement by:	

BUYER/T	RANSFEREE		RECORDING DATA	
			Date Recorded:	
MAILING	ADDRESS		Document Number:	
			Assessor's Identification Number:	
SELLER/1	TRANSFEROR		MB PG	PCL
MAILING	ADDRESS		Phone Numbers:	
			Buyer: ()	
FIELD	LÉASE		Seller:	
	ADTANT NOTICE	_	Sec: Twp: Ri	ng:
	ORTANT NOTICE	tu or n	construct home subject to lead exercity toy	ation and that is
	v requires any tran <mark>sfe</mark> ree acq <mark>ui</mark> ring an i <mark>nte</mark> rest in real propert ed by the county assessor, to file a Change in Ownership State			
Statem	ent must be filed at the time of recording or, if the transfer is no	t reco	rded, within 90 days of the date of the change in o	wnership, except
	ere the change in ownership has occurred by reason of death ate is probated, shall be filed at the time the inventory and app			
	s from the date of a written request by the Assessor results in a			
taxes a	pplicable to the ne <mark>w b</mark> ase year value <mark>reflecti</mark> ng the <mark>chan</mark> ge in ow	vn <mark>er</mark> sh	ip of the real property or manufactured home, whic	chever is greater,
	to exceed five thousand dollars (\$5,000) if the property is eligit roperty is not eligible for the homeowners' exemption if that fa			
	I shall be collected like any other delinquent property taxes, an			the assessment
A. TF	RANSFER INFORMATION (Check the appropriate boxes to indi	icate tl	ne method by which you acquired an interest in the	e property.)
1.	Purchase (complete Sections B and C on the reverse side).	13.	Was this transfer/addition solely between spouses	
			or registered domestic partners, divorce settlement,	☐ Yes ☐ No
2	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes		etc.?	
	possession.	14.	Was this transaction only a correction of the	
3.	Inheritance. Transfer by will or intestate succession.		name(s) of persons or entities holding title?	☐ Yes ☐ No
ა. ∟	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
4.	Trade or exchange. The above described property has been	16.	Was th <mark>is transaction</mark> the termination of a joint	
	traded or exchanged for other real property or tangible personal		tenancy interest?	☐ Yes ☐ No
	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 transferred %.		document?	☐ Yes ☐ No
_	nansieneu /u.	19.	Was this document recorded to create, assign,	
7.	Foreclosure or trustee sale.		or terminate a lender's interest in this property?	☐ Yes ☐ No
8.	Gift.	20.	Has this property been transferred to a trust?	☐ Yes ☐ No
J			If yes , is the trust: Revocable Irrevocable	
9.	Life estate.	21.	If the trust is irrevocable, is the transferor or the	
10	Pecenyayanaa (nay off)		transferor's spouse or registered domestic	☐ Yes ☐ No
10. 🗀	Reconveyance (pay-off).		partner the sole present beneficiary?	
11.	Creation or assignment of a lease:	22.	Does this property revert to the transferor in	
	(date)		12 years or less? (Clifford Trust)	☐ Yes ☐ No
12.	Termination of a lease:		If you answered no to 21 or 22, attach a copy of	the trust
	(date)		agreement.	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



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:	
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, subumed in the acquisition, if not included in item 15a. Please list each lease, it ition price, by specific items. Cash to seller:	uch as loan including
	. ,	Amount(s): Interest rate(s):	
	Source(s) of financing (bank, seller, etc.):		
D.	Purchase price allocated to: Fixed plant & equipment:	Moveable equipment about the sale or transfer which should be called to the attention of the Ass	sessor.)
		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	I	

