CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



CHRISTINA WYNN SACRAMENTO COUNTY ASSESSOR PROPERTY TRANSFER SECTION 3636 American River Drive, Suite 200 Sacramento, CA 95864-5952

Sacramento, CA 95864-5952 Phone (916) 875-0750 FAX (916) 875-0755 https://assessor.saccounty.gov

BUYER/TF	RANSFEREE		RECORDING DATA			
			Date Recorded:			
MAILING A	ADDRESS		Document Number:			
			Assessor's Identific	ation Number:		
SELLER/T	RANSFEROR		ME	PG	PCL	
MAILING A	ADDRESS		Phone Numbers:			
FIELD			Buyer: () Seller: Sec: Tv	/p:	Rng:	
assesse Stateme that wh the esta 90 days taxes ap but not if the pr	v requires any transferee acquiring an interest in real propert ed by the county assessor, to file a Change in Ownership State ent must be filed at the time of recording or, if the transfer is no ere the change in ownership has occurred by reason of death ate 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 pplicable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligil roperty is not eligible for the homeowners' exemption if that fai I shall be collected like any other delinquent property taxes, an	ment with the t t recorded, with the statement caisal is filed. T penalty of eith nership of the r ble for the hom lure to file was	County Recorder or A nin 90 days of the date shall be filed within 1 he failure to file a Cha er: (1) one hundred d eal property or manuf eowners' exemption not willful. This pena	ssessor. The Ch of the change in 50 days after the ange in Ownersh ollars (\$100); or (actured home, w or twenty thousan ilty will be added	ange in Ownershi ownership, excep date of death or, i ip Statement within 2) 10 percent of the hichever is greated d dollars (\$20,000	
A. TR	ANSFER INFORMATION (Check the appropriate boxes to indi	cate the metho	d by which you acquir	ed an interest in t	the property.)	
1. 🗌	Purchase (complete Sections B and C on the reverse side).		transfer/addition solely red domestic partners,			
2. 🗌	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession.	etc.? 14. Was this	transaction only a cor of persons or entities h	rectio <mark>n o</mark> f the	Yes No	
3. 🗌	Inheritance. Transfer by will or intestate succession. Date of death Relationship to deceased	15. If you hol	d title to this property a ler or transferor also a	s a joint tenant,	Yes No	
4. 🗌	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.	tenancy i		2	🗌 Yes 🗌 No	
5. 🗌	Merger or stock acquisition.	related b	transfer between family usinesses?		🗌 Yes 🗌 No	

- 6. **Partial interest transfer.** Was less than 100 percent of the property transferred? If **yes**, indicate the percentage transferred ______%.
- 7. Foreclosure or trustee sale.
- 8. Gift.
- 9. Life estate.
- 10. Reconveyance (pay-off).

12. Termination of a lease:

11. Creation or assignment of a lease:

20. Has this property been transferred to a trust? Yes No 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 No If you answered no to 21 or 22, attach a copy of the trust agreement.

Yes No

Yes No

under a deed of trust, mortgage, or other similar

or terminate a lender's interest in this property?

19. Was this document recorded to create, assign,

document?

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)



EF-502-G-R06-0516-34000211-2 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:	Parcel number:				
3.	Date sales agreement or letter of intent signed: _		Effec	tive transfer date:					
4.	Closing date:	Recording docum	nent: Number:	Date:					
	Name, address and phone number of person wit relative to the transaction:	-							
6.	Name, address, and phone number of any const	ultants used in connection	on with the transaction	on:					
7.	Interest acquired (please report decimal fraction: Revenue interest: Working			g interest owners & percentages:					
8.	Number of wells: Producing	Injection	All idle	e Other					
9.	Productive acres in the parcel:		Total acres in	the parcel:					
10.	Production rates at acquisition: Oil	b/d Gas	s	mcf/d Water	b/d				
11.	Price received for oil and gas at acquisition: Oi		\$/b	Gas	\$/mcf				
12.	Oil gravity: API Ga	as:	btu/mcf Ave	erage producing depth:	ft				
	Proved reserves: Developed: Oil				mcf				
	Undeveloped: Oil —				mcf				
14.	Were appraisals, evaluations, cash flow projection								
	 a. If yes, please enclose copies of those apprain most relied upon in establishing the purchase b. If no, please explain in Section D how the purchase enclose a copy of the following: a. The sales agreement or contract including all 	isals, evaluations, cash t e price. Irchase price was deterr	flow projections or a nined.	nalyses. Please identify the analysis o	r appraisal				
C.	 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. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION Terms: Total purchase price: Cash to seller: 								
	Production and/or conventional loan(s):		Amount(s):	Interest rate(s	s):				
	Source(s) of financing (bank, seller, etc.):								
			М						
D.	Purchase price allocated to: Fixed plant & equipment: Moveable equipment								
		CERTIFI	CATION						
Prop Part	nership including any accompany poration declaration is binding		nents, is true, correct	e of California that the foregoing and all ir and complete to the best of my knowledg					
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)			TITLE					
SIGN	ATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE	DATE						
NAM	E OF ENTITY (typed or printed)	FEDERAL EMPLOYER ID NUMBE	FEDERAL EMPLOYER ID NUMBER						
PREI	PARER'S NAME AND ADDRESS (typed or printed)	TITLE							
DAY1 (TIME TELEPHONE NUMBER E-MAIL ADDRESS								

