CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Josie Gonzales

Assessor-Recorder-County Clerk County of San Bernardino Assessor's Office 222 W. Hospitality Lane - 4th Floor San Bernardino, CA 92415-0311 www.sbcounty.gov/arc Phone: (909) 387-8307 Toll Free: (877) 885-7654

BUYER/TRANSFEREE	RECORDING DATA
	Date Recorded:
MAILING ADDRESS	Document Number:
	Assessor's Identification Number:
SELLER/TRANSFEROR	MB PG PCL
MAILING ADDRESS	Phone Numbers:
FIELD	Buyer: () Seller: ()
IMPORTANT NOTICE The law requires any transferee acquiring an interest in real property or m assessed by the county assessor, to file a Change in Ownership Statement of Statement must be filed at the time of recording or, if the transfer is not recor that where the change in ownership has occurred by reason of death the st the estate is probated, shall be filed at the time the inventory and appraisal i 90 days from the date of a written request by the Assessor results in a penal taxes applicable to the new base year value reflecting the change in ownershi but not to exceed five thousand dollars (\$5,000) if the property is eligible for if the property is not eligible for the homeowners' exemption if that failure to roll and shall be collected like any other delinquent property taxes, and be s	with the County Recorder or Assessor. The Change in Ownership rded, within 90 days of the date of the change in ownership, except tatement shall be filed within 150 days after the date of death or, if is filed. The failure to file a Change in Ownership Statement within ity of either: (1) one hundred dollars (\$100); or (2) 10 percent of the ip of the real property or manufactured home, whichever is greater, the homeowners' exemption or twenty thousand dollars (\$20,000) of file was not willful. This penalty will be added to the assessment ubject to the same penalties for nonpayment.
A. TRANSFER INFORMATION (Check the appropriate boxes to indicate the	ie method by which you acquired an interest in the property.)
 Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes 	Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement, Yes No etc.? Was this transaction only a correction of the name(s) of persons or entities holding title? Yes No

- 4. Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.
- 5. Merger or stock acquisition.
- 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:

(date)

(date)

- 15. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant? Yes No
 16. Was this transaction the termination of a joint tenancy interest? Yes No
 - 17. Was this transfer between family members or related businesses?
 - 18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?

🗌 Yes 🗌 No

🗌 Yes 🗌 No

Yes No

🗌 Yes 📙 No

- 19. Was this document recorded to create, assign, or terminate a lender's interest in this property?
- 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?

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

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

EF-502-G-R06-0516-36000193-2 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 lett	er of intent signed:	Effective transfer date:			
4.	Closing date:	Recording docur	nent: Number: Date:			
5.	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.	. Name, address, and phone number of any consultants used in connection with the transaction:					
7	Interest acquired (please rer	port decimal fractions out of total: e g 0.87	5 out of 1 000)			
	 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		All idle Other			
	Productive acres in the parce					
10.	Production rates at acquisition		smcf/d Water	b/d		
	Price received for oil and gas			\$/mcf		
	Oil gravity:		btu/mcf Average producing depth:			
13.	Proved reserves: Dev	•	bbl Gas	mcf		
		eloped: Oil	bbl Gas			
14.			ade to assist in establishing a purchase price? 🛄 Yes 🗋			
		pies of those appraisals, evaluations, cash blishing the purchase price.	flow projections or analyses. Please identify the analysis or	appraisal		
		If no , please explain in Section D how the purchase price was determined.				
15.	Please enclose a copy of the	e following:				
	a. The sales agreement or o agreements.	ents thereto, as well as other related agreements or contract	s, such as loan			
	wells and related equipm	ent, separately.	e acquisition, if not included in item 15a. Please list each lea	ise, including		
C.	by specific items.					
	Terms: Total purchase price	e:	Cash to seller:			
	Production and/or convention	nal loan(s):	Amount(s): Interest rate(s)			
	Source(s) of financing (bank	r, seller, etc.):				
	Purchase price allocated to: Fixed plant & equipment: Moveable equipment					
D.	REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)					
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		CERTIFI	CATION			
Drop	OWNERSHIP TYPE	ertify (or declare) under penalty of perjury und€	er the laws of the State of California that the foregoing and all inf	ormation hereon,		
	nership 🗌 incl		nents, is true, correct and complete to the best of my knowledge	and belief. This		
Cor		claration is binding on each and every co-o	wner and/or partner.			
	E OF ASSESSEE OR AUTHORIZED A	GENT (typed or printed)	TITLE			
SIGN	IATURE OF ASSESSEE OR AUTHORIZ	ZED AGENT	DATE			
NAME OF ENTITY (typed or printed)			FEDERAL EMPLOYER ID NUMBER	<		
PRE	PARER'S NAME AND ADDRESS (typed	l or printed)	TITLE			
DAY	TIME TELEPHONE NUMBER	E-MAIL ADDRESS				
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