## CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



## Steve J. Bestolarides Assessor-Recorder-County Clerk San Joaquin County

San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Telephone (209) 468-2658 www.sjgov.org/assessor\_recorder

BUYER/TRANSFEREE		RECORDING DATA	RECORDING DATA			
		Date Recorded:	Date Recorded:			
MAILING	ADDRESS	Document Number:				
	RANSFEROR	Assessor's Identification Number:				
SELLER/	RANSFERUR	MB PG	PCL			
MAILING	ADDRESS	Phone Numbers:				
		Buyer: ()				
FIELD	LEASE	Seller:				
-	ORTANT NOTICE					
	v requires any transferee acq <mark>ui</mark> ring an interest in real property ed by the county assessor, to file a Change in Ownership Stater					
	ent must be filed at the time of recording or, if the transfer is not					
that wh	ere the change in ownership has occurred by reason of death t	the statement shall be filed within 150 days after the date of	of death or, if			
	ate is probated, shall be filed at the time the inventory and appra					
	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 owr					
	to exceed five thousand dollars (\$5,000) if the property is eligib					
if the p	roperty is not eligible for the homeowners' exemption if that fail	ure to file was not willful. This penalty will be added to the				
	I shall be collected like any other delinquent property taxes, and					
A. TF	RANSFER INFORMATION (Check the appropriate boxes to indic	ate the method by which you acquired an interest in the pro	perty.)			
1. 🗌	<b>Purchase</b> (complete Sections B and C on the reverse side).	13. Was this transfer/addition solely between spouses				
2.	Land Salas Contract A contract for the purchase of property		Yes 🗌 No			
Z. L	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				
• <b>–</b>		name(s) of persons or entities holding title?	Yes 🗌 No			
3. 🗆		15. If you hold title to this property as a joint tenant,				
	Date of death Relationship to deceased		Yes 🗌 No			
		16 Was this transaction the termination of a joint				
4.	Trade or exchange. The above described property has been	16. Was this transaction the termination of a joint tenancy interest?	Yes 🗌 No			
	traded or exchanged for other real property or tangible personal					
	property.	17. Was this transfer between family members or	Yes 🗌 No			
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 <b>yes</b> , indicate the percentage transferred%.	document?	Yes 🗌 No			
		19. Was this document recorded to create, assign,				
7.	Foreclosure or trustee sale.	or terminate a lender's interest in this property?	Yes 🗌 No			
• _	0.15	20. Has this property been transferred to a trust?	Yes 🗌 No			
8. ∟	Gift.	If <b>yes</b> , is the trust: Revocable Irrevocable				
9.	Life estate.	21. If the trust is irrevocable, is the transferor or the				
			Yes 🗌 No			
10.	Reconveyance (pay-off).	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.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)



11. Creation or assignment of a lease:

12. Termination of a lease: \_

## EF-502-G-R06-0516-39000155-2 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 lette	er of intent signed:		Effective transfer date:			
4.	Closing date:	Recording do	cument: 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 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	A	All idle Other			
9.	Productive acres in the parce	əl:	Total ac	pres in the parcel:			
10.	Production rates at acquisitio	on: Oilb/d	Gas	mcf/d Waterb/d			
11.	Price received for oil and gas	at acquisition: Oil		\$/b_Gas\$/mcf			
12.	Oil gravity:	API Gas:	btu/mcf	f Average producing depth:ft			
		eloped: Oil					
	Undeve	eloped: Oil		_ bbl Gasmcf			
14.			s made to assist in	n establishing a purchase price? 🔲 Yes 🔲 No			
15. <b>C.</b>	<ul> <li>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.</li> <li>b. If no, please explain in Section D how the purchase price was determined.</li> <li>Please enclose a copy of the following: <ul> <li>a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as loan agreements.</li> <li>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.</li> <li>c. The allocation to your company books of the total acquisition price, by specific items.</li> </ul> </li> <li>PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION Terms: Total purchase price: <ul> <li>Amount(s):</li> <li>Amount(s):</li> <li>Interest rate(s):</li> </ul> </li> </ul>						
D.	Source(s) of financing (bank, seller, etc.):						
		CERT	IFICATION				
Part	nership inclusion inclusico inclusico inclusico inclusico inclusico inclusico inclusio	rtify (or declare) under penalty of perjury u	nder the laws of the ocuments, is true, co	e State of California that the foregoing and all information hereon, orrect and complete to the best of my knowledge and belief. <b>This</b> artner.			
	E OF ASSESSEE OR AUTHORIZED AG	GENT (typed or printed)		TITLE			
SIGN	ATURE OF ASSESSEE OR AUTHORIZ	ZED AGENT		DATE			
NAM	E OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER				
PREI	PARER'S NAME AND ADDRESS (typed	or printed)		TITLE			
DAY <sup>-</sup>	TIME TELEPHONE NUMBER	E-MAIL ADDRESS					

