EF-502-G-R06-0516-48000222-1 BOE-502-G (P1) REV. 6 (05-16)

## **CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY**

File this statement by:



## Glenn Zook Solano County Assessor/Recorder

675 Texas Street Suite 2700 Fairfield, CA 94533-6338 (707) 784-6210 http://www.solanocounty.com/depts/ar assessor@solanocounty.gov

BUYER/TRANSFEREE	RECORDING DATA			
DUTLIVITYMOFEREE	Date Recorded:			
MAILING ADDRESS	Date Recorded:			
	Assessor's Identification Number:			
SELLER/TRANSFEROR	MB PG PCL			
	Phone Numbers:			
MAILING ADDRESS	,			
FIELD LEASE	Buyer: ( )			
FIELD	Seller:			
	Sec: Twp: Rng:			
IMPORTANT NOTICE				
	y or manufactured home subject to local property taxation, and that is ment with the County Recorder or Assessor. The Change in Ownership			
	t recorded, within 90 days of the date of the change in ownership, except			
that where the change in ownership has occurred by reason of death the statement shall be filed within 150 days after the date of death or, if				
	raisal 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,			
but not to exceed five thousand dollars (\$5,000) if the property is eligible 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, an				
A. TRANSFER INFORMATION (Check the appropriate boxes to indi	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			
2. Land Sales Contract. A contract for the purchase of property	or registered domestic partners, divorce settlement,			
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?			
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? $\ \square$ Yes $\ \square$ No			
	16. Was this transaction the termination of a joint			
4. 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.				
6. Partial interest transfer. Was less than 100 percent of the	18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar			
property transferred? If <b>yes</b> , indicate the percentage	document?			
transferred%.				
П	19. Was this document recorded to create, assign,			
7. L Foreclosure or trustee sale.	or terminate a lender's interest in this property?			
8. Gift.	20. Has this property been transferred to a trust?			
o. 🗀 Gitt.	If <b>yes</b> , 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 $\Box$ Yes $\Box$ No			
10. Reconveyance (pay-off).	partner the sole present beneficiary?			
	22. Dogo this property revert to the transferer in			
11. Creation or assignment of a lease:	22. Does this property revert to the transferor in  12 years or less? (Clifford Trust)  Yes No			
(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			

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

agreement.



В.	PROPERTY INFORMATION (Complete each item as it appl	es to this transaction.)		
1.				
2.	Field name: Lease name	e: Parcel number:		
3.	Date sales agreement or letter of intent signed:	Effective transfer date:		
4.	Closing date: Recor	ding document: Number: Da	ate:	
5.	Name, address and phone number of person with purchasing relative to the transaction:		vailable 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 & percentage of the percentage of th	entages:	
8.		n All idle		
9.	Productive acres in the parcel:	Total acres in the parcel:		
10.	Production rates at acquisition: Oil			
	Price received for oil and gas at acquisition: Oil	\$/b Gas	\$/mcf	
12.	Oil gravity:API Gas:	btu/mcf Average producing depth:	ft	
	Proved reserves: Developed: Oil	bbl Gas	mcf	
	Undeveloped: Oil	bbl Gas	mcf	
14.	Were appraisals, evaluations, cash flow projections or other	analyses made to assist in establishing a purchase price	? 🗌 Yes 🗌 No	
15.	<ul> <li>a. If yes, please enclose copies of those appraisals, evaluat most relied upon in establishing the purchase price.</li> <li>b. If no, please explain in Section D how the purchase price Please enclose a copy of the following:</li> <li>a. The sales agreement or contract including all exhibits and agreements.</li> <li>b. A complete listing of all assets acquired and liabilities ass wells and related equipment, separately.</li> </ul>	was determined.  I amendments thereto, as well as other related agreement	nts or contracts, such as loan	
c. The allocation to your company books of the total acquisition price, by specific items.  C. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION				
٥.	Terms: Total purchase price:			
	Production and/or conventional loan(s):		nterest rate(s):	
	Source(s) of financing (bank, seller, etc.):		moreot rate(o).	
	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.)			
		CERTIFICATION		
Pari Cor		perjury under the laws of the State of California that the foregents or documents, is true, correct and complete to the best of every co-owner and/or partner.		
	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 EMPL	OYER ID NUMBER	
PRE	PARER'S NAME AND ADDRESS (typed or printed)	TITLE		
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS			

