CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:

Stani <mark>slaus</mark>
<u>Cou</u> nty

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BUYER/TRANSFEREE	RECORDING DATA						
MAILING ADDRESS	Date Recorded: Document Number:						
SELLER/TRANSFEROR	Assessor's Identification Number: MB PG PCL						
MAILING ADDRESS	Phone Numbers:						
	Buyer: () Seller: () Sec: Twp: Rng:						
The law requires any transferee acquiring an interest in real property or manufactured home subject to local property taxation, and that is assessed by the county assessor, to file a Change in Ownership Statement with the County Recorder or Assessor. The Change in Ownership Statement must be filed at the time of recording or, if the transfer is not 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 the estate is probated, shall be filed at the time the inventory and appraisal is filed. The failure to file a Change in Ownership Statement within 90 days from the date of a written request by the Assessor results in a penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the taxes applicable to the new base year value reflecting the change in ownership 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) if the property is not eligible for the homeowners' exemption if that failure to file was not willful. This penalty will be added to the assessment roll and shall be collected like any other delinquent property taxes, and be subject to the same penalties for nonpayment.							
A. TRANSFER INFORMATION (Check the appropriate boxes to indicate t							
 Purchase (complete Sections B and C on the reverse side). 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.?						
possession. 14.	. Was this transaction only a correction of the name(s) of persons or entities holding title?						
Inheritance. Transfer by will or intestate succession. Date of death15. Relationship to deceased	. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?						
trade or exchanged for other real property or tangible personal	Was this transaction the termination of a joint tenancy interest?						
5. Merger or stock acquisition.	Was this transfer between family members or related businesses?						

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

12. Termination of a lease:

11. Creation or assignment of a lease:

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

Yes No

🗌 Yes 🗌 No

18. Was this document recorded to substitute a trustee

under a deed of trust, mortgage, or other similar

or terminate a lender's interest in this property?

If **yes**, is the trust: Revocable Irrevocable

19. Was this document recorded to create, assign,

20. Has this property been transferred to a trust?

21. If the trust is irrevocable, is the transferor or the

transferor's spouse or registered domestic

partner the sole present beneficiary?

document?

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)



EF-502-G-R06-0516-50000186-2 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 letter of intent signed:		E	ffective transfer date:			
4.	Closing date:	Recording docu	ment: 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:						
8.	Number of wells: Producing			idle Other			
	Productive acres in the parcel:			s in the parcel:			
10.	Production rates at acquisition: Oil	b/d Ga	as	mcf/d Water	b/d		
	Price received for oil and gas at acquisition: O Oil gravity:API G			\$/b_Gas Average producing depth:	\$/mcf		
		a3.		bl Gas			
15.					mcf		
14	Were appraisals, evaluations, cash flow projecti						
15.	 a. If yes, please enclose copies of those appramost relied upon in establishing the purchas 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 	e price. urchase price was deter	rmined.				
C.	 agreements. 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:						
	Production and/or conventional loan(s):				e(s):		
	Source(s) of financing (bank, seller, etc.):						
D.	Purchase price allocated to: Fixed plant & equ REMARKS (Please include below any additional	ipment:		Moveable equipment hich should be called to the attention o			
		CERTIF	ICATION				
Part	including any accompar poration declaration is binding		iments, is true, corre	tate of California that the foregoing and a ect and complete to the best of my knowle ner.			
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)			TITLE			
SIGN	ATURE OF ASSESSEE OR AUTHORIZED AGENT			DATE			
NAME OF ENTITY (typed or printed)			FEDERAL EMPLOYER ID NUI	MBER			
PREI	PARER'S NAME AND ADDRESS (typed or printed)			TITLE			
DAYT (IME TELEPHONE NUMBER E-MAIL ADDRESS			I			

