EF-502-G-R06-0516-55000082-1 BOE-502-G (P1) REV. 6 (05-16)

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

File this statement by:



## **Kaenan Whitman Tuolumne County Assessor - Recorder**

2 South Green Street, Third Floor

Sonora, CA 95370 Phone: (209) 533-5535 Fax: (209) 533-5674

Email: assessor@tuolumnecounty.ca.gov

				DECORDING DATA			
BUYER/TRANSFEREE				Date Recorded:			
MAIL	ING A	DDRESS		Document Number:			
SELL	ER/TF	RANSFEROR		Assessor's Identification Number:			
JLLL	. <b>ட</b> ı V I I	WHO ENOT		MB PG	PCL		
MAIL	ING A	DDRESS		Phone Numbers:			
FIELI	)	LEASE		Buyer:			
				Seller:			
IM	PO	RTANT NOTICE		Sec: Rr	ıg:		
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.							
Α.	TR	ANSFER INFORMATION (Check the appropriate boxes to indic	cate th	ne 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 or registered domestic partners, divorce settlement,	☐ Yes ☐ No		
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.	14.	etc.?  Was this transaction only a correction of the name(s) of persons or entities holding title?	Yes No		
3.		Inheritance. Transfer by will or intestate succession.  Date of death  Relationship to deceased	15.	If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?	Yes No		
4.		<b>Trade or exchange.</b> The above described property has been traded or exchanged for other real property or tangible personal property.		Was this transaction the termination of a joint tenancy interest?	☐ Yes ☐ No		
5.		Merger or stock acquisition.	17.	Was this transfer between family members or related businesses?	☐ Yes ☐ No		
6.		Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage transferred%.	18.	Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	☐ Yes ☐ No		
7.		Foreclosure or trustee sale.	19.	Was this document recorded to create, assign, or terminate a lender's interest in this property?	☐ Yes ☐ No		
8.		Gift.	20.	Has this property been transferred to a trust?  If <b>yes</b> , is the trust: Revocable Irrevocable	☐ Yes ☐ No		
9.	_	Life estate.	21.	If the trust is irrevocable, is the transferor or the transferor's spouse or registered domestic	☐ Yes ☐ No		
10.	Ш	Reconveyance (pay-off).		partner the sole present beneficiary?			
11.		Creation or assignment of a lease:	22.	Does this property revert to the transferor in 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 t	he trust		

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

agreement.



В.	PROPERTY INFORMATION (Complete each item as it appl	lies to this transaction.)			
1.	Seller's name and address:				
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: Date:			
5.			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 & percentages:			
8.	Number of wells: Producing Injectio	on All idle Other			
9.	Productive acres in the parcel:	Total acres in the parcel:			
10.			b/d		
	Price received for oil and gas at acquisition: Oil	\$/b Gas	\$/mcf		
	, i	btu/mcf Average producing depth:	ft		
	Proved reserves: Developed: Oil	bbl Gas	mcf		
	·		mcf		
14.					
15. <b>C</b> .	most relied upon in establishing the purchase price. b. If <b>no</b> , please explain in Section D how the purchase price was determined.  15. Please enclose a copy of the following: a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such 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, included and related equipment, separately. c. The allocation to your company books of the total acquisition price, by specific items.				
	. ,				
D.					
	Lease name: Parcel number:  te sales agreement or letter of intent signed: Recording document: Number  me, address and phone number of person with purchasing firm who is familiar with the transaction and would be available to answer questions aftive to the transaction:  me, address, and phone number of any consultants used in connection with the transaction and would be available to answer questions aftive to the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection with the transaction:  me, address, and phone number of any consultants used in connection and consultants.  More and penalts of the following:  Integrable:  More of wells: Producing  More of wells: Producing  More and a transaction:  More of wells: Producing  More and a transaction:  More of wells: Producing  More and a transaction:  More of wells: Producing and any additional unformation producing and any additional unformation producing and penalts of penalts of penalts of penalts of penalts of penalts of penalts.  More able of the attention of the Assessor.)  CERTIFICATION  MORE SHIP TYPE  I certify (or declare) under penalty of penalts on decuments, is true, correct and complete to the best of my knowledge and bel				
Pari Cor Oth	nership including any accompanying statement declaration is binding on each and er	nts or documents, is true, correct and complete to the best of my knowledge and every co-owner and/or partner.			
NAM	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 EMPLOYER ID NUMBER			
PRE	PARER'S NAME AND ADDRESS (typed or printed)	TITLE			
DAY (	TIME TELEPHONE NUMBER E-MAIL ADDRESS				

