EF-502-G-R06-0516-07000460-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Gus Kramer County Assessor

2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

BUYER/TRANSFEREE			RECORDING DATA			
MAILING ADDRESS			Date Recorded: Document Number:			
SELLER/TRANSFEROR			Assessor's Identification Number: MB PG	PCL		
MAILING	ADDRESS		Phone Numbers:	. 02		
			Buyer: ()			
FIELD	LEASE		Buyer: () ()			
IMPC	ORTANT NOTICE		Sec: Twp: Rn	g:		
Statem that wh the esta 90 days taxes a but not if the p	ed by the county assessor, to file a Change in Ownership State ent must be filed at the time of recording or, if the transfer is not ere the change in ownership has occurred by reason of death ate is probated, shall be filed at the time the inventory and appers from the date of a written request by the Assessor results in a pplicable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligoroperty is not eligible for the homeowners' exemption if that fall shall be collected like any other delinquent property taxes, and	ot reconthe some services of the some services of t	orded, within 90 days of the date of the change in own tatement shall be filed within 150 days after the date is filed. The failure to file a Change in Ownership Solty of either: (1) one hundred dollars (\$100); or (2) this pof the real property or manufactured home, which is the homeowners' exemption or twenty thousand to file was not willful. This penalty will be added to	vnership, except te of death or, if Statement within I o percent of the hever is greater, dollars (\$20,000)		
A. TF	RANSFER INFORMATION (Check the appropriate boxes to ind	licate ti	he method by which you acquired an interest in the	property.)		
1. \square	Purchase (complete Sections B and C on the reverse side). Land Sales Contract. A contract for the purchase of property	13.	Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement, etc.?	☐ Yes ☐ No		
	in which the seller retains legal title to it after the buyer takes possession.	14.	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.	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal	16.	Was this transaction the termination of a joint tenancy interest?	☐ Yes ☐ No		
5. 🗌	property. 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	18.	Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	☐ Yes ☐ No		
7.	transferred %. 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 yes , is the trust: Revocable Irrevocable	☐ Yes ☐ No		
9. 10.	Life estate. Reconveyance (pay-off).	21.	If the trust is irrevocable, is the transferor or the transferor's spouse or registered domestic partner the sole present beneficiary?	☐ Yes ☐ No		
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 the	he trust		

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

agreement.

(date)



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B .	PROPERTY INFORMATION (Complete each		•					
	Seller's name and address:			Parcel number				
	Date sales agreement or letter of intent signed:							
4	Closing 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: Work	-	,	ers & percentages:				
8.	Number of wells: Producing	Injection	All idle	Other				
9.	Productive acres in the parcel:		Total acres in the parcel:					
	Production rates at acquisition: Oil							
11.	Price received for oil and gas at acquisition:	Oil	\$/b Gas	\$/mcf				
12.	Oil gravity:API	Gas:	btu/mcf Average producing	depth: ft				
13.	Proved reserves: Developed: Oil		bbl Gas	mcf				
	Undeveloped: Oil —		bbl Gas —	mcf				
14.	Were appraisals, evaluations, cash flow projections	ections or other analyses made	e to assist in establishing a purch	nase price?				
15. C.	 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 as loan 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 							
0.	Terms: Total purchase price:		Cash to seller:					
	Production and/or conventional loan(s):							
	· ,		. ,	interest rate(s).				
	Source(s) of financing (bank, seller, etc.):							
D.	Purchase price allocated to: Fixed plant & equipment: Moveable equipment REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)							
	OWNERSHIP TYPE	CERTIFICA	ATION					
Pari Cor	tnership including any accom		ts, is true, correct and complete to	at the foregoing and all information hereon, the best of my knowledge and belief. This				
NAM	IE OF ASSESSEE OR AUTHORIZED AGENT (typed or printed	1)	ТІТІ	.E				
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT	DAT	E					
NAM	IE OF ENTITY (typed or printed)		FEC	ERAL EMPLOYER ID NUMBER				
PRE	PARER'S NAME AND ADDRESS (typed or printed)	ТІТІ	.E					
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS		I					

