CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Xochitl Marina Camacho Monterey County Assessor P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435

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BUYER/TRANSFEREE		RECORDING DATA		
MAILING ADDRESS		Date Recorded: Document Number:		
		Assessor's Identification Number:		
SELLER/TRANSFEROR		MB PG PCL		
MAILING ADDRESS		Phone Numbers:		
		Buyer: ()		
FIELD	LEASE	Seller: ()		
		Sec: Twp: Rng:		

IMPORTANT NOTICE

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 the method by which you acquired an interest in the property.)

- 1. Description Purchase (complete Sections B and C on the reverse side).
- 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.
- 3. Inheritance. Transfer by will or intestate succession. Date of death ______ Relationship to deceased ______
- 4. Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.
- 5. Merger or stock acquisition.
- Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage transferred ______%.
- 7. Foreclosure or trustee sale.
- 8. Gift.
- 9. Life estate.
- 10. Reconveyance (pay-off).

12. Termination of a lease:

11. Creation or assignment of a lease:

(date)

(date)

13. Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement, etc.?
14. Was this transaction only a correction of the name(s) of persons or entities holding title? Yes No
15. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant? Yes No
16. Was this transaction the termination of a joint tenancy interest? Yes No

🗌 Yes 🗌 No

- 17. Was this transfer between family members or related businesses?
- 18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?
- 19. Was this document recorded to create, assign, or terminate a lender's interest in this property? □ Yes □ No
- 20. Has this property been transferred to a trust? Yes No If **yes**, is the trust: Revocable Irrevocable
- 21. If the trust is irrevocable, is the transferor or the transferor's spouse or registered domestic partner the sole present beneficiary?

If you answered no to 21 or 22, attach a copy of the trust agreement.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

EF-502-G-R06-0516-27000045-2 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 n	umber:
3.	Date sales agreement or letter of inter	nt signed:	Effective transfer da	te:
4.	Closing date:	Recording docume	ent: Number:	Date:
5.	Name, address and phone number of relative to the transaction:			ould be available to answer questions
6.	Name, address, and phone number of	any consultants used in connectior	n with the transaction:	
7.	Interest acquired (please report decim	al fractions out of total; e.g., 0.875 (out of 1.000).	
	Revenue interest:	Working interest:	Other working interest owne	ers & percentages:
	Number of wells: Producing			
9.	Productive acres in the parcel:		Total acres in the parcel:	
0.	Production rates at acquisition: Oil _	b/d Gas_	mcf/d	Waterb/d
1.	Price received for oil and gas at acquis	sition: Oil	\$/b Gas	\$/mcf
2.	Oil gravity:	_API Gas:	btu/mcf Average producing	depth: ft
3.	Proved reserves: Developed:	Oil	bbl Gas	m
	Undeveloped:	Oil	bbl Gas	m
4.	Were appraisals, evaluations, cash flo	w projections or other analyses mai	de to assist in establishing a purch	nase price? 🗌 Yes 🗌 No
15.	 a. If yes, please enclose copies of the most relied upon in establishing the b. If no, please explain in Section D for Please enclose a copy of the following a. The sales agreement or contract in agreements. 	e purchase price. now the purchase price was determi g:	ined.	
	b. A complete listing of all assets acquivells and related equipment, separ		acquisition, if not included in item	15a. Please list each lease, including
	c. The allocation to your company bo PURCHASE PRICE OR TRANSFER		v specific items.	
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	Terms: Total purchase price:			
	Production and/or conventional loan(s			Interest rate(s):
	Source(s) of financing (bank, seller, et	,		
	Purchase price allocated to: Fixed pl			
).	REMARKS (Please include below any	additional information about the sa	ale or transfer which should be cal	ed to the attention of the Assessor.)
		CERTIFIC	ATION	

Partnership Corporation Other		including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief. This declaration is binding on each and every co-owner and/or partner.	
NAME OF ASSESSEE OF	RAUTHOF	NZED AGENT (typed or printed)	TITLE
SIGNATURE OF ASSESS	EE OR AL	ITHORIZED AGENT	DATE
NAME OF ENTITY (typed	or printed,		FEDERAL EMPLOYER ID NUMBER
PREPARER'S NAME AND	ADDRES	S (typed or printed)	TITLE

DAYTIME	TELEPHONE	NUMBER
()	

E-MAIL ADDRESS

