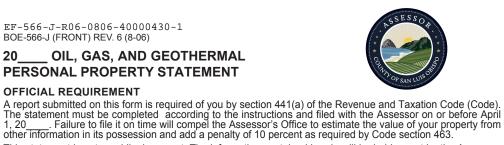
OFFICIAL REQUIREMENT

20 **OIL, GAS, AND GEOTHERMAL** PERSONAL PROPERTY STATEMENT



Office of Tom J. Bordonaro, Jr. San Luis Obispo County Assessor

County Government Center 1055 Monterey Street, Suite D360 San Luis Obispo, CA 93408 Telephone (805) 781-5643 Fax: (805) 781-5641 Email: Assessor@co.slo.ca.us Web Site: slocounty.ca.gov/assessor

Code section 451); it c Code section 408. Attac CAREFULLY READ AND I I. NAME AND MAILING /	ent.		(a se	CATION OF THE PROPERTY: eparate report must be filed for each property) d name							
					I	Lease	e name a	and poo	l		
					2						
					3.		CEL NUI rate area	-			
					4		NE NUM		()		
L (Maka	noocoori (corrocti	ono to printod po	amo and mailing	addraaa			ddress (
	e necessary correcti	•	•	audress)				1			/
	PERSONAL PROPERTY						ASSESSOR'S USE ONLY FULL VALUE				
5. Supplies (fuel) T	/pe: Gravity: Items			Barrels:							
	items		ACQUIS. ORIGINAL YEAR COST								
6. Office furniture											
							_				
7. Warehouse stock	< (parts, tools, equip	oment, etc.)					_				
							-				
							-				
8. Yard stock (rods,	tubing, casing, etc.)					-				
	<u> </u>	,									
9. Other (chemicals	, unlicensed vehicle	es, etc.)					_				
9. Other (chemicals	, unlicensed vehicle	es, etc.)					_				
`	·	· ,	OTHERS (if none	write "none")			-				
 9. Other (chemicals 10. DECLARATION 	OF PROPERTY BE	ELONGING TO (•	,			_				
10. DECLARATION	OF PROPERTY BE (SI iles contracts in line	ELONGING TO (BY CODE NUMBE	ER)			Year	Year	Description	Cost to	Annual
10. DECLARATION Report conditional sa 1. Leased	OF PROPERTY BE (SI iles contracts in line d Equipment	ELONGING TO (PECIFY TYPE B s 6-9 as applica	BY CODE NUMBE ble 4. Vending E	ER)			Year of Acq.	Year of Mfr.	Description and Lease or Identification	Cost to Purchase New	Annual Rent
10. DECLARATION Report conditional sa 1. Leased 2. Leased	OF PROPERTY BE (SI iles contracts in line	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Oth	BY CODE NUMBE ble 4. Vending E ner businesses	ER)	ty		of	of	and Lease or	Purchase	
10. DECLARATION Report conditional sa 1. Leased 2. Leased	OF PROPERTY BE (SI iles contracts in line d Equipment d-Purchase Option I lized Leased Equipr	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Oth	BY CODE NUMBE ble 4. Vending E ner businesses	ER) Equipment	ty		of	of	and Lease or Identification	Purchase	
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name	OF PROPERTY BE (SI iles contracts in line d Equipment d-Purchase Option I lized Leased Equipr	ELONGING TO (PECIFY TYPE B s 6-9 as applical Equipment5. Oth ment	BY CODE NUMBE ble 4. Vending E ner businesses	ER) Equipment	ty		of	of	and Lease or Identification	Purchase	
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name	OF PROPERTY BE (SI iles contracts in line d Equipment d-Purchase Option I lized Leased Equipr	ELONGING TO (PECIFY TYPE B s 6-9 as applical Equipment5. Oth ment	BY CODE NUMBE ble 4. Vending E ner businesses	ER) Equipment	ty		of	of	and Lease or Identification	Purchase	
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address	OF PROPERTY BE (SI iles contracts in line d Equipment d-Purchase Option I lized Leased Equipr	ELONGING TO (PECIFY TYPE B s 6-9 as applical Equipment5. Oth ment	BY CODE NUMBE ble 4. Vending E ner businesses	ER) Equipment	ty		of	of	and Lease or Identification	Purchase	
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name	OF PROPERTY BE (SI iles contracts in line d Equipment d-Purchase Option I lized Leased Equipr	ELONGING TO (PECIFY TYPE B s 6-9 as applical Equipment5. Oth ment	BY CODE NUMBE ble 4. Vending E ner businesses	ER) Equipment	ty		of Acq.	of Mfr.	and Lease or Identification Number	Purchase	
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address	OF PROPERTY BE (SI iles contracts in line d Equipment d-Purchase Option I lized Leased Equipr	ELONGING TO (PECIFY TYPE B s 6-9 as applical Equipment5. Oth ment	BY CODE NUMBE ble 4. Vending E ner businesses	ER) Equipment	ty		of Acq.	of Mfr.	and Lease or Identification Number	Purchase	
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address	OF PROPERTY BE (SI iles contracts in line d Equipment d-Purchase Option I lized Leased Equipr	ELONGING TO (PECIFY TYPE B s 6-9 as applical Equipment5. Oth ment	BY CODE NUMBE ble 4. Vending E her businesses 6. Governme	ER)			of Acq.	of Mfr.	and Lease or Identification Number	Purchase	
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address 11. Remarks	OF PROPERTY BE (SI des contracts in line dequipment d-Purchase Option R lized Leased Equipr lation: A. Lessor	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Oth ment B. Lessee	BY CODE NUMBE ble 4. Vending E 6. Governme DECLARA n must be complet	ER) Equipment Ent-Owned Proper TION BY ASSES	SEE ou do not do		of Acq. TOTA VALU	of Mfr. AL FUL JE	and Lease or Identification Number	Purchase New	Rent
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address	OF PROPERTY BE (SI iles contracts in line d Equipment J-Purchase Option I lized Leased Equipr pation: A. Lessor	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Other ment B. Lessee	BY CODE NUMBE ble 4. Vending E ner businesses 6. Governme DECLARA n must be complet of California that 1 h	ER) Equipment Ent-Owned Proper TION BY ASSES Ted and signed. If y ave examined this j	SEE bu do not do	ement, i	of Acq. TOTA VALU	of Mfr.	and Lease or Identification Number	Purchase New	Rent
10. DECLARATION Report conditional sa 1. Leasec 2. Leasec 3. Capital Tax Oblig Lessor's Name Mailing Address 11. Remarks 11. Remarks 11. declare under penalty	OF PROPERTY BE (SI les contracts in line d Equipment d-Purchase Option I lized Leased Equipr (ation: A. Lessor Note: The foll of perjury under the I to the best of my know by the person named a	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Oth ment B. Lessee Owing declaration aws of the State of ledge and belief it in as the assessee in	BY CODE NUMBE ble 4. Vending E ner businesses 6. Governme DECLARA n must be complet of California that I h is true, correct, and this statement at 12	TION BY ASSES	SEE but do not do property state all property	ement, i	of Acq. TOTA VALU	of Mfr.	and Lease or Identification Number	Purchase New	Rent
10. DECLARATION Report conditional sa 1. Leasec 2. Leasec 3. Capital Tax Oblig Lessor's Name Mailing Address 11. Remarks 11. Remarks 11. Remarks 11. declare under penalty other attachments, and t controlled, or managed t OWNERSHIP	OF PROPERTY BE (SI les contracts in line d Equipment d-Purchase Option I lized Leased Equipm ation: A. Lessor A. Lessor Note: The foll of perjury under the I to the best of my know, by the person named a SIGNATURE OF ASSE	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Oth ment B. Lessee B. Lessee owing declaration aws of the State of ledge and belief it it as the assessee in SSEE OR AUTHORIZ	BY CODE NUMBE ble 4. Vending E ner businesses 6. Governme DECLARA n must be complet of California that 1 h is true, correct, and this statement at 12 ZED AGENT*	ER) Equipment ent-Owned Proper TION BY ASSES ted and signed. If y have examined this complete and includ 2:01 a.m. on January	SEE but do not do property state all property	ement, i	of Acq. TOTA VALU	of Mfr.	and Lease or Identification Number	Purchase New	Rent
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address 11. Remarks 11. Remarks 11. Remarks 11. Remarks 11. OWNERSHIP TYPE	OF PROPERTY BE (SI les contracts in line d Equipment d-Purchase Option I lized Leased Equipm ation: A. Lessor A. Lessor Note: The foll of perjury under the I to the best of my know, by the person named a SIGNATURE OF ASSES	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Oth ment B. Lessee B. Lessee owing declaration aws of the State of ledge and belief it it as the assessee in SSEE OR AUTHORIZ	BY CODE NUMBE ble 4. Vending E ner businesses 6. Governme DECLARA n must be complet of California that 1 h is true, correct, and this statement at 12 ZED AGENT*	ER) Equipment ent-Owned Proper TION BY ASSES ted and signed. If y have examined this complete and includ 2:01 a.m. on January	SEE but do not do property state all property	ement, i	of Acq. TOTA VALU	of Mfr.	and Lease or Identification Number	Purchase New	Rent
10. DECLARATION Report conditional sa 1. Leasec 2. Leasec 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address 11. Remarks 11. Remarks 11. Remarks 11. Remarks 12. Controlled, or managed I OWNERSHIP TYPE Proprietorship	OF PROPERTY BE (SI les contracts in line d Equipment d-Purchase Option I lized Leased Equipm ation: A. Lessor A. Lessor Note: The foll of perjury under the I to the best of my know, by the person named a SIGNATURE OF ASSES	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Other ment B. Lessee Owing declaration aws of the State of ledge and belief it it as the assesse in SSEE OR AUTHORIZED ACTION	BY CODE NUMBE ble 4. Vending E ner businesses 6. Governme DECLARA n must be complet of California that 1 h is true, correct, and this statement at 12 ZED AGENT* GENT* (typed or printe	ER) Equipment ent-Owned Proper TION BY ASSES ted and signed. If y have examined this complete and includ 2:01 a.m. on January	SEE but do not do property state all property	ement, i	of Acq. TOTA VALU	of Mfr.	and Lease or Identification Number	Purchase New	Rent
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address 11. Remarks 11. Remarks 11. Remarks 11. Remarks 11. OWNERSHIP TYPE	OF PROPERTY BE (SI les contracts in line d Equipment d-Purchase Option R lized Leased Equipm ation: A. Lessor A. Lessor A. Lessor ation: A. Lessor SIGNATURE OF ASSES NAME OF ASSESSEE NAME OF ASSESSEE NAME OF LEGAL ENT	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Other ment B. Lessee Owing declaration aws of the State of ledge and belief it is sthe assessee in SSEE OR AUTHORIZED AG OR AUTHORIZED AG	BY CODE NUMBE ble 4. Vending E ner businesses 6. Governme DECLARA n must be complet of California that 1 h is true, correct, and this statement at 12 ZED AGENT* GENT* (typed or printed)	ER) Equipment ent-Owned Proper TION BY ASSES ted and signed. If y have examined this complete and includ 2:01 a.m. on January	SEE but do not do property state es all property 1, 20	ement, i v require	of Acq. TOTA VALU	of Mfr.	and Lease or Identification Number	Purchase New dules, statem ed, claimed, p	Rent
10. DECLARATION Report conditional sa 1. Leased 2. Leased 3. Capital Tax Oblig Lessor's Name Mailing Address Lessor's Name Mailing Address In Remarks 11. Remarks 12. Controlled, or managed I OWNERSHIP TYPE Proprietorship Partnership	OF PROPERTY BE (SI iles contracts in line d Equipment J-Purchase Option I lized Leased Equipr pation: A. Lessor Note: The foll of perjury under the I to the best of my know by the person named a SIGNATURE OF ASSESEE NAME OF ASSESSEE NAME OF LEGAL ENT PREPARER'S NAME A	ELONGING TO (PECIFY TYPE B s 6-9 as applicat Equipment5. Other ment B. Lessee Owing declaration aws of the State of ledge and belief it is sthe assessee in SSEE OR AUTHORIZED AG OR AUTHORIZED AG	BY CODE NUMBE ble 4. Vending E ner businesses 6. Governme DECLARA n must be complet of California that 1 h is true, correct, and this statement at 12 ZED AGENT* GENT* (typed or printed)	ER) Equipment ent-Owned Proper TION BY ASSES ted and signed. If y have examined this complete and includ 2:01 a.m. on January	SEE but do not do property state all property	ement, i v require	of Acq. TOTA VALU	of Mfr.	and Lease or Identification Number	Purchase New dules, statem ed, claimed, p	Rent



INSTRUCTIONS FOR COMPLETING THE OIL, GAS, AND GEOTHERMAL PERSONAL PROPERTY STATEMENT

Report all personal property owned by the respondent and any property belonging to others on the lease as of January 1. Line numbers listed in these instructions refer to identical line numbers printed on the form.

LINE 1. NAME AND MAILING ADDRESS

a. NAME OF OPERATOR (PERSON OR CORPORATION)

If the name is preprinted, check the spelling and correct any error. In the case of an individual, enter the last name first, then the first name and middle initial. Partnerships must enter at least two names, showing the last name, first name and middle initial for each partner. Corporation names should be complete so they will not be confused with fictitious or DBA (Doing Business As) names.

b. DBA OR FICTITIOUS NAME

Enter the DBA name under which you are operating in this county below the name of the sole owner, partnership, or corporation.

c. MAILING ADDRESS

Enter the mailing address of the legal entity shown in line 1a above. This may be either a street address or a post office box number. It may differ from the actual location of the property. Include the city, state and zip code.

LINE 2. LOCATION OF THE PROPERTY

Fill in the lease and field name. Conform to State Division of Oil and Gas classification in regard to names of fields and pools. For geothermal properties, ignore term "pool," and fill in "operating unit" if this term applies.

LINE 3. PARCEL NUMBER

Fill in the parcel number and tax rate area number, if known.

LINE 4. PHONE NUMBER

barrels

Enter the phone number where we may contact you or your authorized representative for information regarding the subject property.

LINE 5. SUPPLIES (Used as fuel)

Enter the type of fuel, A.P.I. gravity, and the number of

LINES 6 OFFICE EQUIPMENT, WAREHOUSE STOCK, YARD STOCK, OTHER

thru 9. Enter the year acquired, if known, the cost, and a description sufficient to identify the property.

LINE 10. DECLARATION OF PROPERTY BELONGING TO OTHERS

If property belonging to others, or their business entities, is located on your premises, report the owner's name and mailing address. If it is leased equipment, read your agreement carefully and enter the type by Code and whether A-Lessor or B-Lessee has the tax obligation. For assessment purposes, the Assessor will consider, but is not bound to, the contractual agreement.

- 1. LEASED EQUIPMENT. Report the year of acquisition, the year of manufacture, description of the leased property, the lease contract number or other identification number, the total installed cost to purchase (including sales tax), and the annual rent; do not include in lines 6-9 (see No. 3 below).
- 2. LEASE-PURCHASE OPTION EQUIPMENT. Report here all equipment acquired on lease-purchase option on which the **final payment remains to be made.** Enter the year of acquisition, the year of manufacture, description of the leased property, the lease contract number or other identification number, the total installed cost to purchase (including sales tax), and the annual rent. **If final payment has been made**, report full cost in lines 6-9, as applicable (see No. 3 below).
- 3. CAPITALIZED LEASE EQUIPMENT. Report here all leased equipment that has been capitalized at the present value of the minimum lease payments on which a final payment remains to be made. Enter the year of acquisition, the year of manufacture, description of the leased property, the lease contract number or other identification number, and the total installed cost to purchase (including sales tax). Do not include in lines 6-9 unless final payment has been made.
- 4. VENDING EQUIPMENT. Report the model and description of the equipment; do not include in lines 6-9.
- 5. OTHER BUSINESSES. Report other businesses on your premises.
- 6. GOVERNMENT-OWNED PROPERTY. If you possess or use government-owned land, improvements, or fixed equipment, or government-owned property is located on your premises, report the name and address of the agency which owns the property, and a description of the property.

DECLARATION BY ASSESSEE

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a **corporation**, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a **partnership**, the declaration must be signed by an authorized employee or agent. In the case of a **Limited Liability Company** (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.

