EF-502-G-R05-1111-06000663-1 BOE-502-G (P1) REV. 5 (11-11)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

Colusa County Assessor 547 Market St., Suite 101 Colusa, CA 95932 (530) 458-0450

Bob Buckner

File this statement by:

BUYER/TI	RANSFEREE	RECORDING DATA		
MAILING	ADDRESS	Date Recorded:		
WAILING	NUUNESS	Document Number:		
SELLER/TRANSFEROR		Assessor's Identification Number:		
		MB PG PCL Phone Numbers:		
MAILING ADDRESS				
FIELD	LEASE	Buyer: () Seller: ()		
IMPORTANT NOTICE		Sec: Twp: Rng:		
Statem that wh the esta 90 days taxes a but not if the p	ent must be filed at the time of recording or, if the transfer is no nere the change in ownership has occurred by reason of death ate is probated, shall be filed at the time the inventory and apply is 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 eligi	ement with the County Recorder or Assessor. The Change in Ownership it recorded, within 90 days of the date of the change in ownership, except the statement shall be filed within 150 days after the date of death or, if raisal is filed. The failure to file a Change in Ownership Statement within a penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the rership of the real property or manufactured home, whichever is greater, ble for the homeowners' exemption or twenty thousand dollars (\$20,000) illure to file was not willful. This penalty will be added to the assessment id be subject to the same penalties for nonpayment.		
A. TF	RANSFER INFORMATION (Check the appropriate boxes to indi	cate the 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 solely between husband and wife,		
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.	addition of a spouse, divorce settlement, etc.?		
<u>-</u>		14. Was this transaction only a correction of the name(s) of persons or entities holding title to the property?		
3.	· · · · · · · · · · · · · · · · · · ·	15. If you hold title to this property as a joint tenant,		
	Date of death Relationship to deceased	is the seller or transferor also a joint tenant?		
	Relationship to deceased	16. Was this transaction the termination of a joint		
4. 📙	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal	tenancy interest? Yes \(\sum \) No		
	property.	17. Was this transfer between family members or		
5. 🗌	Merger or stock acquisition.	related businesses?		
Э. Ш	merger of stock acquisition.	18. Was this document recorded to substitute a trustee		
6.	Partial interest transfer. Was less than 100 percent of the	under a deed of trust, mortgage, or other similar		
	property transferred? If yes , indicate the percentage transferred %.	document?		
_	######################################	19. Was this document recorded to create, assign,		
7. 📙	Foreclosure or trustee sale.	or terminate a lender's interest in this property?		
8.	Gift.	20. Has this property been transferred to a trust?		
9.	Life estate.	21. If the trust is irrevocable, is the transferor or the		
10.	Reconveyance (pay-off).	transferor's spouse the sole present beneficiary?		
10.	neconveyance (pay-on).	22. Does this property revert to the transferor in		
11.	Creation or assignment of a lease:	12 years or less? (Clifford Trust)		
12 🗆	(date) Termination of a lease:	If you answered no to 21 or 22, attach a copy of the trust agreement.		
12. 🗀	(date)	(Please complete the reverse side.)		

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



В.	PROPERTY INFORMATION (Complete each item as it applies to this transaction.)					
1.	Seller's name and address:					
2. Field name:						
3.	Date sales agreement or letter of intent signed: Effective transfer date:					
4.	Closing date: Date: 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: Working interest:		terest owners & percentages:			
8.	Number of wells: Producing Injectic	on All idle	Other			
9.	Productive acres in the parcel:	Total acres in the	parcel:			
10.	Production rates at acquisition: Oil	b/d Gas	mcf/d Water	b/d		
11.	Price received for oil and gas at acquisition: Oil	\$/b G	as	\$/mcf		
12.	Oil gravity:API Gas:	btu/mcf Average	e producing depth:	ft		
13.	Proved reserves: Developed: Oil	bbl Ga	IS	mcf		
	Undeveloped: Oil	bbl Ga	IS	mcf		
14.	Were appraisals, evaluations, cash flow projections or other analyses made to assist in establishing a purchase price?					
15.	 b. If no, please explain in Section D how the purchase price was determined. i. 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 loal 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.	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:		r:			
	Production and/or conventional loan(s):					
	Source(s) of financing (bank, seller, etc.):	` '	•	,-		
	Purchase price allocated to: Fixed plant & equipment: Moveable equipment					
D. REMARKS (Please include below any additional information about the sale or transfer which should be called the sale of transfer which should be called				e Assessor.)		
		CERTIFICATION				
	OWNERSHIP TYPE	perjury under the laws of the State of C	California that the foregoing and all in	formation hereon		
Pari Cor		nts or documents, is true, correct and				
NAM	ME OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE			
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE			
NAM	ME OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBE	ER .		
PRE	PARER'S NAME AND ADDRESS (typed or printed)		TITLE			
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS					

