EF-502-G-R06-0516-07000471-1 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

DUVED/TE	DAMOSEDEE		RECORDING DATA				
BUYER/TRANSFEREE MAILING ADDRESS				Date Recorded:			
			Document Number:				
			Assessor's Identification Number:				
SELLER/T	RANSFEROR		MB PG	PCL			
MAILING A	ADDRESS		Phone Numbers:				
			Ruyer: ()				
FIELD	LEASE		Buyer: () Seller: ()				
IMPC	PRTANT NOTICE		Sec: Twp: Rr	ng:			
that wh the esta 90 days taxes ap but not if the pr	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 apper 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 eligitary operty is not eligible for the homeowners' exemption if that fall shall be collected like any other delinquent property taxes, and	the straisal in the straisal in the strain t	tatement shall be filed within 150 days after the dais filed. The failure to file a Change in Ownership lty of either: (1) one hundred dollars (\$100); or (2) ip of the real property or manufactured home, which the homeowners' exemption or twenty thousand of file was not willful. This penalty will be added to	ate of death or, if Statement within 10 percent of the chever is greater, dollars (\$20,000)			
A. TR	ANSFER INFORMATION (Check the appropriate boxes to indi	icate ti	he 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				
2.	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes		or registered domestic partners, divorce settlement, etc.?	☐ Yes ☐ No			
	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.		If you hold title to this property as a joint tenant,				
	Date of death		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			
	property.	17.	Was this transfer between family members or				
5.	Merger or stock acquisition.		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			
	transferred %.	19.	Was this document recorded to create, assign,				
7.	Foreclosure or trustee sale.		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.	Life estate.	21.	If the trust is irrevocable, is the transferor or the				
10.	Reconveyance (pay-off).		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 conv of	the trust			

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

agreement.



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В.	PROPERTY INFORMATION (Complete each		,						
1.					-				
	Field name: Lease name:								
3.	Date sales agreement or letter of intent signed								
4.	losing date: Date: Date:								
5.	5. Name, address and phone number of person with purchasing firm who is familiar with the transaction and would be available to answer quest 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 fraction	ons out of total; e.g., 0.875 ou	ıt of 1.000).		_				
	Revenue interest: Worki	ng interest:	Other working interest own	ers & percentages:	_				
8.	Number of wells: Producing	Injection	All idle	Other	_				
9.	Productive acres in the parcel:		Total acres in the parcel:						
10.	Production rates at acquisition: Oil	b/d Gas _	mcf/c	Waterb/d					
11.	Price received for oil and gas at acquisition:	Oil	\$/b Gas	\$/mcf					
12.	Oil gravity:API	Gas:	btu/mcf Average producir	g depth: ft					
13.	Proved reserves: Developed: Oil		bbl Gas	mc	٥f				
	Undeveloped: Oil —		bbl Gas —	m	cf				
14.	Were appraisals, evaluations, cash flow project	ctions or other analyses made	e to assist in establishing a pure	chase price?					
15. C .	 b. If no, please explain in Section D how the purchase price was determined. 5. 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. c. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION 								
О.	Terms: Total purchase price:		Cash to seller:						
	Production and/or conventional loan(s):				_				
	Source(s) of financing (bank, seller, etc.):		` '	Interest rate(s).	_				
	• • • • • • • • • • • • • • • • • • • •		Moveable equip	ment	_				
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.)								
		CERTIFICA	TION		_				
Pari Cor	tnership including any accomp		ts, is true, correct and complete t	nat the foregoing and all information hereor to the best of my knowledge and belief. Thi					
NAM	IE OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		ТІ	ΓLE					
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT		DA	TE					
NAM	IE OF ENTITY (typed or printed)		FF	DERAL EMPLOYER ID NUMBER					
. 47 (11/1				E CONTRACTOR CONTRACTO					
PREPARER'S NAME AND ADDRESS (typed or printed)				ΓLE	_				
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS		1						

