EF-502-G-R05-1111-11000773-1 BOE-502-G (P1) REV. 5 (11-11)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

Glenn County Assessor/Clerk/Recorder 516 W. SYCAMORE ST., 2ND FLOOR

WILLOWS, CA 95988
Phone: (530) 934-6402

Phone: (530) 934-6402 FAX: (530) 934-6571

Sendy Perez

File this statement by:

BUYER/TRANSFEREE							RECOR	DING DATA	\			
					Date I	Recorded:	:					
MAILING ADDRESS							ber:					
					Asses	sor's Iden	tification	Number:				
SELLER/TRANSFEROR							MB	PG	PCL	.		
MAILING	ADDRESS				Phone I	Numbers	:					
					Buyor:	()						
FIELD	Li	EASE			Caller.	()						
IMPO	ORTANT NOTICE				Sec:		Iwp:	F	≺ng:			
that wh the est 90 days taxes a but not if the p	ent must be filed at the time of re nere the change in ownership ha ate is probated, shall be filed at the sfrom the date of a written reque pplicable to the new base year va to exceed five thousand dollars roperty is not eligible for the hold shall be collected like any othe	is occurred by reason of death the time the inventory and apprest by the Assessor results in a alue reflecting the change in ow (\$5,000) if the property is eligilis meowners' exemption if that fai	the straisal in pena representation to the straight to the str	tatement s is filed. T Ity of eithe ip of the re r the home o file was	shall be he failur er: (1) or eal prope owners not willf	filed with e to file a ne hundre erty or ma ' exemption ul. This p	in 150 day Change ind dollars anufacture on or twe penalty wi	ys after the n Ownership (\$100); or (2 ed home, wh nty thousan II be added	date of de p Statemer 2) 10 perce lichever is d dollars (ath or, if nt within nt of the greater, \$20,000)		
A. TF	RANSFER INFORMATION (Chec	ck the appropriate boxes to indi	cate ti	he method	d by which	ch you ac	quired an	interest in th	he property	/.)		
1.	Purchase (complete Sections B	and C on the reverse side).	13.			-	veen husb e settleme	and and wife		□ No		
2.	Land Sales Contract . A contract for the purchase of property in which the seller retains legal title to it after the buyer takes		14.	Was this	transaction only a	correction of the	103					
۰ ـ	possession.	-4-4-4-		name(s) of the property	of persons or entities holdir erty?		es holding	title to	☐ Yes	☐ No		
3. ∟			15.	If you hole	d title to	this prope	rty as a joi	nt tenant,				
	Date of death			is the sell	e seller or transferor		also a joint tenant?	Yes	☐ No			
4.	Trade or exchange. The above	described property has been	16.	Was this tenancy in		on the terr	mination of	f a joint	☐ Yes	□No		
	traded or exchanged for other rea	al property or tangible personal		-					□ 163			
	property.		17.	Was this			amily mem	bers or	□ v _a a	□ No		
5	Merger or stock acquisition.			related bu						□ NO		
6.	Partial interest transfer. Was le property transferred? If yes, indic	•	18.	under a d	leed of tr		d to substit age, or oth	tute a trustee ner similar		□ No		
	transferred %.	cate the percentage		documen					□ res	□ NO		
7.	Foreclosure or trustee sale.		19.	Was this or termina			d to create est in this p	, ,	☐ Yes	□ No		
8.	Gift.		20.	Has this p				a trust?	☐ Yes e	☐ No		
9.	Life estate.		21.	If the trus				ror or the eneficiary?	☐ Yes	□ No		
10.	Reconveyance (pay-off).		22.	Does this	property	revert to	the transfe	-				
11.	Creation or assignment of a le	ase:		ı∠ years	or iess?	(Clifford Ti	ruSt)		☐ Yes	□ NO		
12. Termination of a lease: agreement.							nswered no to 21 or 22, attach a copy of the trust ent.					
		(Please complete the reverse side.)										

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



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В.	PROPERTY INFORMATION (Complete each item as i	t applies to this tran	isaction.)									
1.	Seller's name and address:											
			Parcel number:									
3.	Date sales agreement or letter of intent signed:											
4.	Closing date: I	Recording documer	nt: Number:	Date:								
5.	Name, address and phone number of person with purchasing firm who is familiar with the transaction and would be available to answer question 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	-	ŕ	owners & percentages:								
8.	Number of wells: Producing In	ijection	All idle									
	Productive acres in the parcel:											
	Production rates at acquisition: Oil											
	Price received for oil and gas at acquisition: Oil											
12.	Oil gravity:API Gas:		btu/mcf Average produ	icing depth:	ft							
13.	Proved reserves: Developed: Oil		bbl Gas		mcf							
	Undeveloped: Oil		bbl Gas		mcf							
14.	Were appraisals, evaluations, cash flow projections or o	other analyses mad	e to assist in establishing a p	urchase price?								
15.	Please enclose a copy of the following: a. The sales agreement or contract including all exhibit agreements.			-								
	 A complete listing of all assets acquired and liabilitie wells and related equipment, separately. 			em 15a. Please list each lease, inclu	laing							
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:		Cash to seller:									
	Production and/or conventional loan(s):	An	nount(s):	Interest rate(s):								
	Source(s) of financing (bank, seller, etc.):											
	Purchase price allocated to: Fixed plant & equipment:		Moveable eq	•								
D.	REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)											
_		CERTIFICA	ATION									
	OWNERSHIP TYPE				,							
Pari Cor	SHELOISHIP -	atements or documer	nts, is true, correct and comple	a that the foregoing and all information te to the best of my knowledge and beli								
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)			TITLE								
SIGN	IATURE OF ASSESSEE OR AUTHORIZED AGENT			DATE								
NAM	E OF ENTITY (typed or printed)			FEDERAL EMPLOYER ID NUMBER								
PRE	PARER'S NAME AND ADDRESS (typed or printed)			TITLE								
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS											

