EF-502-G-R05-1111-14000721-1 BOE-502-G (P1) REV. 5 (11-11)

## **CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY**

Dave Stottlemyre, Assessor PO Box J

**County of Inyo** 

Independence, CA 93526 760 878-0302 Phone inyoassessor@inyocounty.us

File this statement by:

BUYER/T	RANSFEREE	RECORDING DATA		
MAILING	ADDRESS	Date Recorded:		
		Document Number:		
SELLER/	TRANSFEROR	MB PG PCL		
MANUALIO.	ADDDEGO	Phone Numbers:		
WAILING	ADDRESS			
FIELD	LEASE	Buyer: ( ) Seller: ( )		
		Seller: \( \frac{1}{2} \) Sec: \( \text{Twp:} \) Rng: \( \text{Try:} \)		
The law assess Statem that wh the est 90 days taxes a but not	ed by the county assessor, to file a Change in Ownership Stent must be filed at the time of recording or, if the transfer is here the change in ownership has occurred by reason of deate is probated, shall be filed at the time the inventory and a s from the date of a written request by the Assessor results is applicable to the new base year value reflecting the change in to exceed five thousand dollars (\$5,000) if the property is elements.	perty or manufactured home subject to local property taxation, and that is statement with the County Recorder or Assessor. The Change in Ownership is not recorded, within 90 days of the date of the change in ownership, except eath the statement shall be filed within 150 days after the date of death or, if appraisal is filed. The failure to file a Change in Ownership Statement within in a penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the ownership of the real property or manufactured home, whichever is greater, eligible for the homeowners' exemption or twenty thousand dollars (\$20,000) t failure to file was not willful. This penalty will be added to the assessment		
A. TF		indicate 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, addition of a spouse, divorce settlement, etc.?		
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.	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	is the seller or transferor also a joint tenant?		
4.	1	16. Was this transaction the termination of a joint tenancy interest?		
	property.	17. Was this transfer between family members or		
5.	Merger or stock acquisition.	related businesses?		
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		
7.	transferred %.  Foreclosure or trustee sale.	19. Was this document recorded to create, assign, or terminate a lender's interest in this property? ☐ Yes ☐ No		
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 transferor's spouse the sole present beneficiary?		
10.	Reconveyance (pay-off).	22. Does this property revert to the transferor in  12 years or less? (Clifford Trust)  Yes  No		
11.	Creation or assignment of a lease:	—· — — — — — — — — — — — — — — — — — —		
12.	(date) Termination of a lease:	If you answered no to 21 or 22, attach a copy of the trust agreement.		
	(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.)						
	Seller's name and address:						
	2. Field name:						
	Date sales agreement or letter of intent signed: Effective transfer date:						
	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:	Other working interest ow	ners & percentages:			
8.	Number of wells: Producing	Injection	All idle	Other			
	Productive acres in the parcel:						
10.	Production rates at acquisition: Oil	b/d Gas _	mcf	d Waterb/d			
11.	Price received for oil and gas at acquisition: Oil	1	\$/b Gas	\$/mcf			
			btu/mcf Average producing depth: ft				
13.	Proved reserves: Developed: Oil		bbl Gas	mcf			
	Undeveloped: Oil		bbl Gas	mcf			
14.	Were appraisals, evaluations, cash flow projections or other analyses made to assist in establishing a purchase price?   Yes  No						
C.	<ul> <li>Please enclose a copy of the following:</li> <li>a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as loan agreements.</li> <li>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.</li> <li>c. The allocation to your company books of the total acquisition price, by specific items.</li> <li>PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION</li> </ul>						
	Terms: Total purchase price:		Cash to seller:				
	Production and/or conventional loan(s):						
	Source(s) of financing (bank, seller, etc.):			. ,			
Purchase price allocated to: Fixed plant & equipment: Moveable equipment							
D.							
		CERTIFICA	ATION				
Pari	tnership including any accompan		nts, is true, correct and complete	that the foregoing and all information hereon, to the best of my knowledge and belief. <b>This</b>			
NAME OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)				ITLE			
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT	С	DATE				
NAME OF ENTITY (typed or printed)			F	EDERAL EMPLOYER ID NUMBER			
PRE	PARER'S NAME AND ADDRESS (typed or printed)		1	TITLE			
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS						

