EF-502-G-R06-0516-20000371-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

Name of the last o

File this statement by:

Brett Frazier Madera County Assessor

200 West 4th Street Madera, CA 93637-3548 Phone: (559) 675-7710 Fax: (559) 675-7654

www.maderacounty.com/government/assessor

BUYER/TF	RANSFEREE						RECOR	DING DATA		
					Date	Recorded				
MAILING ADDRESS							ber:			
					Asses	ssor's Ider	tification N	Number:		
SELLER/TRANSFEROR							MB	PG	PCL	
MAILING A	DDRESS				Phone	Numbers	:			
					Ruver:	()				
FIELD		LEASE	_		Sallar	()				
								R		
IMPORTANT NOTICE					3ec		ι wp		ng	
Statement that who the esta 90 days taxes apput not if the process.	ent must be filed at the time of ere the change in ownership hate is probated, shall be filed at from the date of a written requipplicable to the new base year to exceed five thousand dollar operty is not eligible for the hor	file a Change in Ownership State recording or, if the transfer is no las occurred by reason of death the time the inventory and appruest by the Assessor results in a value reflecting the change in owers (\$5,000) if the property is eligilater delinquent property taxes, and	t reco the s aisal pena nersh ble fo	orded, with tatement is filed. T lty of eith hip of the r r the hom o file was	nin 90 da shall be 'he failur er: (1) or 'eal prop eowners not willi	ys of the filed with re to file a ne hundre erty or ma d' exemption ful. This p	date of the in 150 day Change in d dollars anufacture on or twen benalty wil	e change in o ys after the d n Ownership (\$100); or (2) ed home, whi nty thousand Il be added to	ownership late of dea Statemer 10 perce chever is dollars (, except ath or, if at within at of the greater, \$20,000)
		eck the appropriate boxes to indi		_		_		_	e property	<u>(.)</u>
1.	Purchase (complete Sections E	B and C on the reverse side).	13.	Was this	transfer/	addition so	olely betwe	en 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			etc.?	ered domest	estic partn	ers, divord	vorce settlement,	∐ Yes	i ∐ No
<u> -</u>										
	possession.		14.			•	correction es holding		☐ Yes	☐ No
3. \square	Inheritance. Transfer by will or Date of death		15.	If you ho	ld title to	this prope	rty as a joir	nt tenant,		
	Relationship to deceased			-			o a joint te		☐ Yes	☐ No
4.	Trade or exchange. The above		16.	Was this tenancy i		on the terr	mination of	f a joint	☐ Yes	☐ No
	property.	ppyg p	17.	Was this	transfer	between fa	amily mem	bers or		
5.	Merger or stock acquisition.			related b	usinesse	s?			Yes	☐ No
6.	Partial interest transfer. Was property transferred? If yes, inc	•	18.		deed of tr		d to substit age, or oth	tute a trustee ner similar	☐ Yes	□ No
	transferred %.		19.	Was this	docume	nt recorded	d to create	, assign,		
7.	Foreclosure or trustee sale.			or termin	ate a len	der's inter	est in this p	property?	☐ Yes	☐ No
8. 🗌	Gift.		20.				sferred to a	a trust?	☐ Yes	☐ No
9. 🗆	Life estate.		21.				the transfe ered dome		☐ Yes	□ No
10.	Reconveyance (pay-off).					resent ben				
11.	Creation or assignment of a l	ease:	22.			y revert to (Clifford Ti	the transfe	eror in	☐ Yes	☐ No
12.	Termination of a lease:	(date)		If you an		no to 21 d	or 22, atta	ch a copy of	the trust	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



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В.	PROPERTY INFORMATION (Complete each item as it	applies to this transaction	1.)							
1.	Seller's name and address:									
2.	Field name: Lease n	name: Lease name:								
3.	Date sales agreement or letter of intent signed:		Effective transfer date:	tive transfer date:						
4.	Closing date: Re	Recording document: 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 questions relative to the transaction:									
6.	Name, address, and phone number of any consultants us	sed in connection with th	e transaction:							
7	Interest acquired (please report decimal fractions out of total; e.g., 0.875 out of 1.000).									
	Revenue interest: Working interest			percentages:						
8.	Number of wells: Producing Inje	ection	All idle	Other						
9.	Productive acres in the parcel:	То	tal acres in the parcel:							
10.	Production rates at acquisition: Oil	b/d Gas	mcf/d Wat	erb/d						
11.	Price received for oil and gas at acquisition: Oil		\$/b Gas	\$/mcf						
	Oil gravity:API Gas:									
	Proved reserves: Developed: Oil									
	Undeveloped: Oil		bbl Gas	mcf						
14.	Were appraisals, evaluations, cash flow projections or other									
15.	most relied upon in establishing the purchase price. b. If no , please explain in Section D how the purchase p Please enclose a copy of the following: a. The sales agreement or contract including all exhibits agreements.		o, as well as other related agree	ements or contracts, such as loan						
	 A complete listing of all assets acquired and liabilities wells and related equipment, separately. 	assumed in the acquisiti	on, if not included in item 15a. I	Please list each lease, including						
C.	c. The allocation to your company books of the total acq PURCHASE PRICE OR TRANSFER AMOUNT INFORM		: items.							
	Terms: Total purchase price:		Cash to seller:							
	Production and/or conventional loan(s):	Amount(s	3):	Interest rate(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 to the attention of the Assessor.)									
		CERTIFICATION								
Par	tnership including any accompanying state poration declaration is binding on each	ements or documents, is tr	rue, correct and complete to the be	foregoing and all information hereon, est of my knowledge and belief. This						
NAM	TE OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE							
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE	DATE							
NAM	ME OF ENTITY (typed or printed)	FEDERAL	FEDERAL EMPLOYER ID NUMBER							
PRE	PARER'S NAME AND ADDRESS (typed or printed)	TITLE								
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS		1							

