EF-502-G-R06-0516-20000309-1 BOE-502-G (P1) REV. 6 (05-16)

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

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

יעו ום	=D/TP	ANSFEREE		RECORDING DATA	
BUYI	_K/   K	MINOFEREE			
MAIL	ING A	DDRESS		Date Recorded:	
				Assessor's Identification Number:	
SELLER/TRANSFEROR				MB PG	PCL
ΜΔΙΙ	ING A	DDRESS		Phone Numbers:	
WID (I)		BUILEGO		Buyer: ( )	
FIELI	D	LEASE		Buyer: ( ) Seller: ( )	
				Sec: Twp: Rr	
IM	PO	RTANT NOTICE		Sec Twp RI	ıg
State that the 90 ctaxe but if the	teme who esta lays es ap not le pr	ed by the county assessor, to file a Change in Ownership State that 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 the is probated, shall be filed at the time the inventory and appears from the date of a written request by the Assessor results in a policable to the new base year value reflecting the change in own to exceed five thousand dollars (\$5,000) if the property is eligoperty is not eligible for the homeowners' exemption if that far shall be collected like any other delinquent property taxes, and	ot recon the soraisal a pena vnershible fo ailure t	orded, within 90 days of the date of the change in outstatement shall be filed within 150 days after the dais filed. The failure to file a Change in Ownership latty of either: (1) one hundred dollars (\$100); or (2) hip of the real property or manufactured home, which the homeowners' exemption or twenty thousand to file was not willful. This penalty will be added to	wnership, except ate of death or, it Statement withir 10 percent of the hever is greater dollars (\$20,000
		ANSFER INFORMATION (Check the appropriate boxes to ind		· · · · · · · · · · · · · · · · · · ·	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
2		possession.	14	. Was this transaction only a correction of the name(s) of persons or entities holding title?	☐ Yes ☐ No
٥.	Ш	Inheritance. Transfer by will or intestate succession.  Date of death	15	. If you hold title to this property as a joint tenant,	
		Relationship to deceased		is the seller or transferor also a joint tenant?	☐ Yes ☐ No
4.		<b>Trade or exchange.</b> 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
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?  If <b>yes</b> , is the trust:   Revocable   Irrevocable	☐ Yes ☐ No
9.		Life estate.	21	If the trust is irrevocable, is the transferor or the transferor's spouse or registered domestic	☐ Yes ☐ No
10.		Reconveyance (pay-off).		partner the sole present beneficiary?	03 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 copy of tagreement.	he trust

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



B. ₁	PROPERTY INFORMATION (		• •	•						
	Seller's name and address:			Parcel number:						
				Effective transfer date:						
	•	-		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 ques relative to the transaction:									
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 owners & percentages:						
8.	Number of wells: Producing		_ Injection	All idle						
9.	Productive acres in the parcel:			Total acres in the parcel:						
10.	Production rates at acquisition	: Oil	b/d Gas _	mcf/c	l Water	b/d				
11.	Price received for oil and gas a	at acquisition: Oil		\$/b Gas		\$/mcf				
12.	Oil gravity:	API Gas	:	btu/mcf Average producir	ng depth:	ft				
13.	Proved reserves: Develo	oped: Oil		bbl Gas		mcf				
	Undevelo	oped: Oil		bbl Gas —		mcf				
14.	Were appraisals, evaluations,	cash flow projection	s or other analyses mad	e to assist in establishing a pure	chase price?	No				
C.	<ul> <li>a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as loa 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> </ul>									
О.	PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION  Terms: Total purchase price:			Cash to seller:						
				nount(s):						
		` '		` '	interest rate(s)					
	Source(s) of financing (bank, seller, etc.): Moveable equipment Moveable equipment									
D.	REMARKS (Please include be		issessor.)							
			CERTIFICA	TION						
Part Cor	tnership includ	ding any accompanyi		ne laws of the State of California the ts, is true, correct and complete the rand/or partner.						
NAM	E OF ASSESSEE OR AUTHORIZED AGE	NT (typed or printed)		TI	TLE					
SIGN	NATURE OF ASSESSEE OR AUTHORIZE	D AGENT		DA	ATE					
NAM	E OF ENTITY (typed or printed)			FE	EDERAL EMPLOYER ID NUMBER					
PRE	PARER'S NAME AND ADDRESS (typed or	r printed)	Ti	TLE						
DAY	TIME TELEPHONE NUMBER	E-MAIL ADDRESS								

