EF-502-G-R06-0516-31000265-1 BOE-502-G (P1) REV. 6 (05-16)

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

File this statement by:

## Matthew R. Maynard **Placer County Assessor**

2980 Richardson Drive Auburn, CA 95603-2640 Phone: (530) 889-4300

Email: assessor@placer.ca.gov Website: www.placer.ca.gov/assessor

BUYI	ER/TR	ANSFEREE			RECORDING DATA			
•					Date Recorded:			
MAILING ADDRESS					Document Number:			
SELLER/TRANSFEROR					Assessor's Identification Number:			
SELL	EK/II	KANSFEROR			MB PG	PCL		
MAIL	ING A	DDRESS			Phone Numbers:			
					Buver: ( )			
FIELI	D	LEASE			Buyer: ( ) ( ) Seller:			
					Sec: Twp: Rr	ıa:		
		RTANT NOTICE			nanufactured home subject to local property taxa			
State that the state of the sta	teme whe esta lays es ap not	ent must be filed at the time of recording ere the change in ownership has occur te is probated, shall be filed at the time from the date of a written request by the policable to the new base year value reflect to exceed five thousand dollars (\$5,000 operty is not eligible for the homeowne	g or, if the transfer is not rec red by reason of death the the inventory and appraisa ne Assessor results in a per ecting the change in owners b) if the property is eligible ers' exemption if that failure	co al i na rsh for	with the County Recorder or Assessor. The Chandrded, within 90 days of the date of the change in obtatement shall be filed within 150 days after the dais filed. The failure to file a Change in Ownership of the either: (1) one hundred dollars (\$100); or (2) hip 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 subject to the same penalties for nonpayment.	wnership, ate of dea Statemen 10 percen hever is dollars (\$	except th or, if t within at of the greater, (20,000)	
A.	TR	ANSFER INFORMATION (Check the a	ppropriate boxes to indicate	e tl	he method by which you acquired an interest in the	property.	)	
1.		Purchase (complete Sections B and C of	n the reverse side). 1	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	
Э.	Ш	Inheritance. Transfer by will or intestate  Date of death  Relationship to deceased	1	15.	If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?	Yes	☐ No	
4.		Trade or exchange. The above describe traded or exchanged for other real proper	ed property has been		Was this transaction the termination of a joint tenancy interest?	☐ Yes	□ No	
5.		property.  Merger or stock acquisition.	1	17.	Was this transfer between family members or related businesses?	Yes	□ No	
6.		Partial interest transfer. Was less than property transferred? If yes, indicate the	100 percent of the	18.	Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	☐ Yes	☐ No	
7	П	transferred %.  Foreclosure or trustee sale.	1	19.	Was this document recorded to create, assign, or terminate a lender's interest in this property?	☐ Yes	□ No	
8.		Gift.	2	20.	Has this property been transferred to a trust?  If <b>yes</b> , is the trust: Revocable Irrevocable	Yes	_	
9.		Life estate.	2	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.					If you answered no to 21 or 22, attach a copy of the trust agreement.			

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



B. ₁	PROPERTY INFORMATION (		• •	•						
	Seller's name and address: Field name:				numher:					
				Effective transfer date:						
	•	-								
	<ul> <li>4. Closing date: Date: Date:</li></ul>									
Name, address, and phone number of any consultants used in connection with the transaction:										
7.	Interest acquired (please repor	 rt decimal fractions	out of total; e.g., 0.875 o	ut of 1.000).						
	Revenue interest:	Working ir	nterest:	Other working interest own	ners & 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 Torms: Total purchase price:			Cash to seller:						
				nount(s):						
		` '		` '	interest rate(s)					
	Source(s) of financing (bank, so Purchase price allocated to:	Moveable equip	mont							
D.	•		e or transfer which should be ca		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								

