CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



James B Rooney Assessor of Amador County 810 Court Street Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721

BUYER/TRANSFEREE		RECOR	DING DATA	
	Date Recorde	ed:		
MAILING ADDRESS	Document Nu	mber:		
SELLER/TRANSFEROR	Assessor's Id	entification I	Number:	
SELLER/TRAINSFERUR		MB	PG	PCL
MAILING ADDRESS	Phone Numbe	rs:		
FIELD	Buyer: (Seller: ()		
IMPORTANT NOTICE	Sec:	Twp:	Rr	ng:
The law requires any transferee acquiring an interest in real property or manufac assessed by the county assessor, to file a Change in Ownership Statement with the Statement must be filed at the time of recording or, if the transfer is not recorded, wi that where the change in ownership has occurred by reason of death the statemen the estate is probated, shall be filed at the time the inventory and appraisal is filed. 90 days from the date of a written request by the Assessor results in a penalty of eit taxes applicable to the new base year value reflecting the change in ownership of the but not to exceed five thousand dollars (\$5,000) if the property is eligible for the hou if the property is not eligible for the homeowners' exemption if that failure to file wa roll and shall be collected like any other delinquent property taxes, and be subject t	County Recorde thin 90 days of th t shall be filed wi The failure to file ther: (1) one hund real property or r meowners' exemp s not willful. This o the same penal	r or Assess e date of the thin 150 day a Change i red dollars nanufacture otion or twe s penalty wi ties for non	or. The Chan e change in or ys after the da n Ownership (\$100); or (2) ed home, whic nty thousand II be added to payment.	nge in Ownership wnership, except ate of death or, if Statement within 10 percent of the chever is greater, dollars (\$20,000) o the assessment
A. TRANSFER INFORMATION (Check the appropriate boxes to indicate the meth				e property.)
2. Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes	is transfer/addition stered domestic par is transaction only	tners, divorc	e settlement,	Yes No

3.	Inheritance. Transfer by will or intestate succession.	
	Date of death	
	Relationship to deceased	

4.	Trade or exchange. The above described	pro	perty has	s be	een	
	traded or exchanged for other real property	or	tangible	per	rson	ą
	property.					

- 5. Merger or stock acquisition.
- 6. **Partial interest transfer.** Was less than 100 percent of the property transferred? If **yes**, indicate the percentage transferred ______%.
- 7. Foreclosure or trustee sale.
- 8. Gift.
- 9. Life estate.
- 10. Reconveyance (pay-off).

12. Termination of a lease:

11. Creation or assignment of a lease:

(date)	

(date)

- 14. Was this transaction only a correction of the 🗌 Yes 🗌 No name(s) of persons or entities holding title? 15. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant? 🗌 Yes 🗌 No 16. Was this transaction the termination of a joint 🗌 Yes 🗌 No tenancy interest? Was this transfer between family members or 17 🗌 Yes 🗌 No related businesses? 18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar 🗌 Yes 🗌 No document? 19. Was this document recorded to create, assign, Yes No or terminate a lender's interest in this property? 🗌 Yes 🗌 No 20. Has this property been transferred to a trust? If yes, is the trust: Revocable Irrevocable 21. If the trust is irrevocable, is the transferor or the 🗌 Yes 🗌 No transferor's spouse or registered domestic partner the sole present beneficiary?
- 22. Does this property revert to the transferor in 12 years or less? (Clifford Trust)

If you answered no to 21 or 22, attach a copy of the trust agreement.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

EF-502-G-R06-0516-03000239-2 BOE-502-G (P2) REV. 6 (05-16)

B. PROPERTY INFORMATION (Complete each item as it applies to this transaction.)

1.	Seller's name and address:			
2.	Field name:	Lease name:		Parcel number:
3.	Date sales agreement or letter of intent sig	gned:	Effective	transfer date:
4.	Closing date:	Recording document:	Number:	Date:
5.	Name, address and phone number of person relative to the transaction:			ction and would be available to answer questions
6.	Name, address, and phone number of any	y consultants used in connection w	th the transaction: _	
7.	Interest acquired (please report decimal fr	ractions out of total; e.g., 0.875 out	of 1.000).	
				terest owners & percentages:
8.	Number of wells: Producing			Other
	Productive acres in the parcel:		Total acres in the	parcel:
10.	Production rates at acquisition: Oil	b/d Gas		mcf/d Waterb/d
	Price received for oil and gas at acquisitio		\$/b_G	as\$/mcf
12.	Oil gravity: AF	PI Gas:	btu/mcf_Average	e producing depth:ft
			bbl Ga	mcm
	Undeveloped: Oil		bbl Ga	<u>is</u> mc
14.	Were appraisals, evaluations, cash flow p	rojections or other analyses made t	o assist in establish	ing a purcha <mark>se price? </mark>
15. C.	 most relied upon in establishing the pu b. If no, please explain in Section D how Please enclose a copy of the following: a. The sales agreement or contract include agreements. 	rrchase price. the purchase price was determined ding all exhibits and amendments th d and liabilities assumed in the acc y. of the total acquisition price, by sp	d. nereto, as well as ot uisition, if not includ	ses. Please identify the analysis or appraisal ther related agreements or contracts, such as loan led in item 15a. Please list each lease, including
	Terms: Total purchase price:		Cash to selle	r
	Production and/or conventional loan(s):	Amo	unt(s):	Interest rate(s):
	Source(s) of financing (bank, seller, etc.):			
	Purchase price allocated to: Fixed plant		Movea	able equipment
D.				ould be called to the attention of the Assessor.)
		CERTIFICAT	ION	
Part	including any acc poration declaration is bi		, is true, correct and	California that the foregoing and all information hereor complete to the best of my knowledge and belief. Thi
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or pr	rinted)		TITLE
	IATURE OF ASSESSEE OR AUTHORIZED AGENT			DATE
NAM	E OF ENTITY (typed or printed)			FEDERAL EMPLOYER ID NUMBER
PREI	PARER'S NAME AND ADDRESS (typed or printed)			TITLE
DAYT (TIME TELEPHONE NUMBER E-MAIL ADDRE	ESS]]

