EF-502-G-R06-0516-07000156-1 BOE-502-G (P1) REV. 6 (05-16)

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

File this statement by:



## **Gus Kramer County Assessor**

2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

BLIVE	D/TD	MANSFEREE	RF	CORDING DATA	
BUIL	K/ I K	MNOFEREE		OCKDING DATA	
MAILI	NG A	DDRESS	Date Recorded:		_
			Document Number:		_
SELLE	ER/TF	RANSFEROR	Assessor's Identifica	PG PCL	
			Phone Numbers:	FG FCL	
MAILI	NG A	DDRESS	Phone Numbers:		
FIELD		LEASE	Buyer: ( )		
FIELD	'	LEADE	Seller:		
	_		Sec: Twr	o: Rng:	
		RTANT NOTICE			
		requires any transferee acq <mark>uir</mark> ing an i <mark>nte</mark> rest <mark>in real</mark> propert ed by the county assessor, to file a Change in Ownership State			
		ent must be filed at the time of recording or, if the transfer is no			
		ere the change in ownership has occurred by reason of death			
		te is probated, shall be filed at the time the inventory and appl from the date of a written request by the Assessor results in a			
		pplicable to the new base year value reflecting the change in ow			
but i	not	to exceed five thousand dollars (\$5,000) if the property is eligi	or the homeowners' exemption or	twenty thousand dollars (\$20,	,000
		operty is not eligible for the homeowners' exemption if that fa			ment
		shall be collected like any other delinquent property taxes, an			
A.	TR	ANSFER INFORMATION (Check the appropriate boxes to indi	the method by which you acquired	d an interest in the property.)	
1.		Purchase (complete Sections B and C on the reverse side).	3. Was this transfer/addition solely b	petween spouses	_
_			or registered domestic partners, o	divorce settlement, $\square$ Yes $\square$	] No
2.	Ш	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes	etc.?		
		possession.	4. Was this transaction only a corre	ection of the	_
			name(s) of persons or entities hol		] No
3.		Inheritance. Transfer by will or intestate succession.	5. If you hold title to this property as	a joint tenant.	
		Date of death	is the seller or transferor also a jo		No
		Relationship to deceased	•		
4.		Trade or exchange. The above described property has been	6. Was this transaction the terminati	on of a joint	] No
		traded or exchanged for other real property or tangible personal	tenancy interest?		_ INO
		property.	7. Was this transfer between family		1
5.		Merger or stock acquisition.	related businesses?	∐ Yes L	J No
			8. Was this document recorded to su		
6.	Ш	Partial interest transfer. Was less than 100 percent of the	under a deed of trust, mortgage, o		7
		property transferred? If <b>yes</b> , indicate the percentage	document?	∐ Yes L	J No
		transferred %.	9. Was this document recorded to cr	reate, assign,	_
7.		Foreclosure or trustee sale.	or terminate a lender's interest in	this property?	No
			0. Has this property been transferred	d to a trust?	No
8.	Ш	Gift.	If <b>yes</b> , is the trust: Revocabl		_ 140
_		I the and the	-		
9.	Ш	Life estate.	<ol> <li>If the trust is irrevocable, is the transferer's appure or registered.</li> </ol>		] N.
10.		Reconveyance (pay-off).	transferor's spouse or registered of partner the sole present beneficia		J No
			partiter the sole present beneficia	пу:	
11.		Creation or assignment of a lease:	2. Does this property revert to the tra	ansferor in	_
		(date)	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 the trust	

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agreement.

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



B.	PROPERTY INFORMATION (Complete each item as it appl	es to this transaction.)			
1.	Seller's name and address:				
2.	Field name: Lease name	: Parcel number:			
3.	Date sales agreement or letter of intent signed:	Effective transfer date:			
4.	Closing date: Recor	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 used in connection with the transaction:				
7.	Interest acquired (please report decimal fractions out of total; e.g., 0.875 out of 1.000).				
		Other working interest owners & percentages:			
8.	Number of wells: Producing Injection	n All idle Other			
		Total acres in the parcel:			
10.		b/d Gasb/d			
	Price received for oil and gas at acquisition: Oil	\$/b Gas \$/mcf			
	Oil gravity: API Gas:	btu/mcf Average producing depth:ft			
	Proved reserves: Developed: Oil				
	Undeveloped: Oil				
14.		analyses made to assist in establishing a purchase price?			
		ons, cash flow projections or analyses. Please identify the analysis or appraisal			
15.	Please enclose a copy of the following:				
	a. The sales agreement or contract including all exhibits and	amendments thereto, as well as other related agreements or contracts, such as loan $% \left\{ 1,2,\ldots ,n\right\}$			
	agreements.				
	<ul> <li>A complete listing of all assets acquired and liabilities ass wells and related equipment, separately.</li> </ul>	umed in the acquisition, if not included in item 15a. Please list each lease, including			
	c. The allocation to your company books of the total acquisi	ion price, by specific items.			
C.	PURCHASE PRICE OR TRANSFER AMOUNT INFORMATI	ON			
	Terms: Total purchase price:	Cash to seller:			
	Production and/or conventional loan(s):	Amount(s): 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 tran <mark>sfer which s</mark> hould be called to the attention of the Assessor.)			
		CERTIFICATION			
Par	including any accompanying statement declaration is binding on each and	nerjury under the laws of the State of California that the foregoing and all information hereon, ats or documents, is true, correct and complete to the best of my knowledge and belief. <b>This</b> every co-owner and/or partner.			
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	TITLE			
SIGN	IATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE			
NAME OF ENTITY (hand or printed)					
NAM	E OF ENTITY (typed or printed)	FEDERAL EMPLOYER ID NUMBER			
PRE	PARER'S NAME AND ADDRESS (typed or printed)	TITLE			
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS				

