## CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



EL DORADO COUNTY JON DEVILLE, ASSESSOR 360 FAIR LN. PLACERVILLE, CA 95667 TEL. 530-621-5719

BUYER/TF	ANSFEREE	RECORDING DATA
		Date Recorded:
MAILING A	NDRESS	Document Number:
SELLER/T	RANSFEROR	Assessor's Identification Number:
OLLELIUI		MB PG PCL
MAILING A	DDRESS	Phone Numbers:
FIELD	LEASE	Buyer: ()
FIELD		Seller:
		Sec: Twp: Rng:
_		or manufactured home subject to local property taxation, and that i
assesse	ed by the county assessor, to file a Change in Ownership Stater	nent with the County Recorder or Assessor. The Change in Ownershi
		recorded, within 90 days of the date of the change in ownership, except
		the statement shall be filed within 150 days after the date of death or,
		aisal is filed. The failure to file a Change in Ownership Statement withi penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of th
		ership of the real property or manufactured home, whichever is greate
but not	to exceed five thousand dollars (\$5,000) if the property is eligib	le for the homeowners' exemption or twenty thousand dollars (\$20,000
		ure to file was not willful. This penalty will be added to the assessmer
	shall be collected like any other delinquent property taxes, and	
A. TR	ANSFER INFORMATION (Check the appropriate boxes to indic	ate the method by which you acquired an interest in the 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	or registered domestic partners, divorce settlement, 🗌 Yes 🛄 N
2. 🗆	in which the seller retains legal title to it after the buyer takes	etc.?
	possession.	14. Was this transaction only a correction of the
• □		name(s) of persons or entities holding title?
3. 🗌	Inheritance. Transfer by will or intestate succession.	15. If you hold title to this property as a joint tenant,
	Date of death Relationship to deceased	is the seller or transferor also a joint tenant?
		10 Was this transaction the termination of a joint
4. 🗌	Trade or exchange. The above described property has been	16. Was this transaction the termination of a joint tenancy interest?
	traded or exchanged for other real property or tangible personal	
	property.	17. Was this transfer between family members or
5.	Merger or stock acquisition.	related businesses?
_		18. Was this document recorded to substitute a trustee
6. 🗌	Partial interest transfer. Was less than 100 percent of the	under a deed of trust, mortgage, or other similar
	property transferred? If yes, indicate the percentage	document?
	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:

	If you answered no to 21 or 22, attach a copy of the trust agreement.				
	12 years or less? (Clifford Trust)	🗌 Yes	L No		
22.	Does this property revert to the transferor in				

19. Was this document recorded to create, assign,

20. Has this property been transferred to a trust?

21. If the trust is irrevocable, is the transferor or the

transferor's spouse or registered domestic

partner the sole present beneficiary?

or terminate a lender's interest in this property?

If **yes**, is the trust: Revocable Irrevocable

Yes No

🗌 Yes 🗌 No

Yes No

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)



## EF-502-G-R06-0516-09000252-2 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 lette	er of intent signed:		Effective transfer date:			
4.	Closing date:	Recording do	cument: 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). Revenue interest: Working interest: Other working interest owners & percentages:						
8.	Number of wells: Producing	Injection	A	All idle Other			
9.	Productive acres in the parce	əl:	Total ac	pres in the parcel:			
10.	Production rates at acquisitio	on: Oilb/d	Gas	mcf/d Waterb/d			
11.	Price received for oil and gas	at acquisition: Oil		\$/b_Gas\$/mcf			
12.	Oil gravity:	API Gas:	btu/mcf	f Average producing depth:ft			
		eloped: Oil					
	Undeve	eloped: Oil		_ bbl Gasmcf			
14.			s made to assist in	n establishing a purchase price? 🔲 Yes 🔲 No			
15. <b>C.</b>	<ul> <li>a. If yes, please enclose copies of those appraisals, evaluations, cash flow projections or analyses. Please identify the analysis or appraisal most relied upon in establishing the purchase price.</li> <li>b. If no, please explain in Section D how the purchase price was determined.</li> <li>Please enclose a copy of the following: <ul> <li>a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as loan 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> </li> <li>PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION <ul> <li>Terms: Total purchase price:</li> <li>Production and/or conventional loan(s):</li> <li>Amount(s):</li> <li>Interest rate(s):</li> </ul> </li> </ul>						
		seller, etc.):					
D.	Purchase price allocated to:	Fixed plant & equipment:		Moveable equipment which should be called to the attention of the Assessor.)			
		CERT	IFICATION				
Part	nership inclusion inclusico inclusico inclusico inclusico inclusico inclusico inclusio	rtify (or declare) under penalty of perjury u	nder the laws of the ocuments, is true, co	e State of California that the foregoing and all information hereon, orrect and complete to the best of my knowledge and belief. <b>This</b> artner.			
	E OF ASSESSEE OR AUTHORIZED AG	GENT (typed or printed)		TITLE			
SIGN	ATURE OF ASSESSEE OR AUTHORIZ	ZED AGENT		DATE			
NAM	E OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER				
PREI	PARER'S NAME AND ADDRESS (typed	or printed)		TITLE			
DAY <sup>-</sup>	TIME TELEPHONE NUMBER	E-MAIL ADDRESS					

