## CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Howard LaHaie Humboldt County Assessor 825 Fifth ST Eureka, CA 95501-1153 Phone: (707) 445-7276

BUYER/TRANSFEREE	RECORDING DATA
	Date Recorded:
MAILING ADDRESS	Document Number:
	Assessor's Identification Number:
SELLER/TRANSFEROR	MB PG PCL
MAILING ADDRESS	Phone Numbers:
	Buyer: ()
FIELD	
	Seller:
IMPORTANT NOTICE	Sec: Twp: Rng:
The law requires any transferee acquiring an interest in real property or manufact	ured home subject to local property taxation, and that is
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, wit that where the change in ownership has occurred by reason of death the statement	
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 hor	
if the property is not eligible for the homeowners' exemption if that failure to file was roll and shall be collected like any other delinguent property taxes, and be subject to	
A. TRANSFER INFORMATION (Check the appropriate boxes to indicate the method	od by which you acquired an interest in the property.)
1. <b>Purchase</b> (complete Sections B and C on the reverse side). 13. Was this	s transfer/addition solely between spouses
Or regis	tered domestic partners, divorce settlement, 🗌 Yes 🗌 No

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION							
12.	Termination of a lease:	If you answered no to 21 or 22, attach a copy of t agreement.	he trust				
11. 🗌	(date)	<ol> <li>Does this property revert to the transferor in</li> <li>12 years or less? (<i>Clifford Trust</i>)</li> </ol>	🗌 Yes 🗌 No				
10.	Reconveyance (pay-off).	transferor's spouse or registered domestic partner the sole present beneficiary?	∐ Yes ∐ No				
9.	Life estate.	21. If the trust is irrevocable, is the transferor or the					
8.	Gift.	20. Has this property been transferred to a trust? If <b>yes</b> , is the trust: Revocable Irrevocable	Yes No				
7.	Foreclosure or trustee sale.	19. Was this document recorded to create, assign, or terminate a lender's interest in this property?	□ Yes □ No				
6.	Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage transferred%.	18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	🗌 Yes 🗌 No				
5.	Merger or stock acquisition.	tenancy interest? 17. Was this transfer between family members or related businesses?	Yes No				
4.	I rade or exchange. The above described property has been	16. Was this transaction the termination of a joint					
3.		<ul><li>15. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?</li></ul>	🗌 Yes 🗌 No				
2. L	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession.	etc.? 14. Was this transaction only a correction of the name(s) of persons or entities holding title?	🗌 Yes 🗌 No				
<u>م</u> ۲		or registered domestic partners, divorce settlement,	🗆 Yes 🗀 No				

## EF-502-G-R06-0516-12000149-2 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 signed:		Effective transfer date:			
4.	Closing date:	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).         Revenue interest:       Working interest:         Other working interest owners & percentages:					
8.	Number of wells: Producing	Injection	All idle Other			
9.	Productive acres in the parcel:	Total ac	pres in the parcel:			
10.	Production rates at acquisition: Oil	b/d Gas	mcf/d Waterb/d			
11.	Price received for oil and gas at acquisition: O	il	\$/b Gas\$/mcf			
12.	Oil gravity: API G	as: btu/mc	Average producing depth:ft			
			_ bbl Gas mcf			
	Undeveloped: Oil —		bbl Gas mcf			
15. <b>C.</b>	<ul> <li>4. Were appraisals, evaluations, cash flow projections or other analyses made to assist in establishing a purchase price? Yes No</li> <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>5. 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> </ul>					
		CERTIFICATION				
Prop Part	nership including any accompar poration declaration is binding		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.			
NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE			
SIGN	ATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE			
NAM	E OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER			
PREF	PARER'S NAME AND ADDRESS (typed or printed)		TITLE			
DAY1 (	TIME TELEPHONE NUMBER E-MAIL ADDRESS					

