CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Douglas W. Wacker County Assessor-Recorder

Lake County Courthouse 255 North Forbes Street Lakeport, CA 95453 Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293 Fax: 707-263-3703

Yes No

🗌 Yes 🗌 No

🗌 Yes 🗌 No

🗌 Yes 🗌 No

Yes No

Yes No

🗌 Yes 🗌 No

🗌 Yes 🗌 No

Yes No

BUYER/TRANSFEREE	RECORDING DATA
	Date Recorded:
MAILING ADDRESS	Document Number:
SELLER/TRANSFEROR	Assessor's Identification Number:
SELLERVIRANSPEROR	MB PG PCL
MAILING ADDRESS	Phone Numbers:
FIELD	Buyer: () Seller:
IMPORTANT NOTICE	Sec: Twp:Rng:
The law requires any transferee acquiring an interest in real property assessed by the county assessor, to file a Change in Ownership Stater Statement must be filed at the time of recording or, if the transfer is not that where the change in ownership has occurred by reason of death the estate is probated, shall be filed at the time the inventory and appra 90 days from the date of a written request by the Assessor results in a taxes applicable to the new base year value reflecting the change in owne but not to exceed five thousand dollars (\$5,000) if the property is not eligible for the homeowners' exemption if that fail roll and shall be collected like any other delinquent property taxes, and	nent with the County Recorder or Assessor. The Change in Ownership 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, if tisal is filed. The failure to file a Change in Ownership Statement within penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the tership of the real property or manufactured home, whichever is greater, le for the homeowners' exemption or twenty thousand dollars (\$20,000) ure to file was not willful. This penalty will be added to the assessment be subject to the same penalties for nonpayment.
A. TRANSFER INFORMATION (Check the appropriate boxes to indic	ate the method by which you acquired an interest in the property.)
 Purchase (complete Sections B and C on the reverse side). Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession. 	 13. Was this transfer solely between husband and wife, addition of a spouse, divorce settlement, etc.? Yes No 14. Was this transaction only a correction of the name(s) of persons or entities holding title to

3.	Inheritance. Trans	fer b	y will or ir	ntes	state	suc	ccession.
	Date of death						
	Relationship to dec	ease	d				

4.	Trade or exchange. The above described	pro	perty has	s be	een	
	traded or exchanged for other real property	or	tangible	pei	son	a
	property.					

5. Merger or stock acquisition.

possession.

- 6. Derived 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:

If you answered no to 21 or 22, attach a copy of the trust agreement.
(Please complete the reverse side.)

the property?

tenancy interest?

related businesses?

document?

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15. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?

16. Was this transaction the termination of a joint

Was this transfer between family members or

18. Was this document recorded to substitute a trustee

under a deed of trust, mortgage, or other similar

or terminate a lender's interest in this property?

If yes, is the trust: Revocable Irrevocable

transferor's spouse the sole present beneficiary?

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

22. Does this property revert to the transferor in

12 years or less? (Clifford Trust)

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)



EF-502-G-R05-1111-17000387-2 BOE-502-G (P2) REV. 5 (11-11)

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

1.	Seller's name and add	ress:				
2.	Field name:		Lease name:		Parcel number:	
3.	Date sales agreement	or letter of intent signed	l:	Effective tra	nsfer date:	
4.	Closing date:		Recording docur	nent: Number:	Date:	
	•	none number of person v	-		on and would be available to answer ques	
6.	Name, address, and p	hone number of any cor	sultants used in connecti	on with the transaction:		
7.			ons out of total; e.g., 0.875	,	est owners & percentages:	
8	Number of wells: Pro	ducina	Injection		Other	
	Productive acres in the			Total acres in the pa		
			hid Ca			b/d
		quisition: Oil				b/d
		nd gas at acquisition:		\$/b Gas		/mcf
		API (btu/mcf Average p		
13.	Proved reserves:	·				
						mcf
14.					g a purchase price? 🗌 Yes 🗌 No	
4.5	most relied upon in b. If no , please expl <mark>a</mark> i	establishing the purchan n in Section D how the p			s. Please <mark>identify the a</mark> naly <mark>sis</mark> or appraisa	al
15.	Please enclose a copy a. The sales agreeme agreements.	-	all exhibits and amendme	ents thereto, as well as othe	r related agreements or contracts, such a	as Ioan
	wells and related e	quipment, separa <mark>tel</mark> y.			in item 15a. Please list each lease, inclu	iding
C.	c. The allocation to your company books of the total acquisition price, by specific items. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION					
	Terms: Total purchas	e price:		Cash to seller:		
	Production and/or con	ventional loan(s):		Amount(s):	Interest rate(s):	
	Source(s) of financing	(bank, seller, etc.):			_	
		ed to: Fixed plant & eq		Moveable	e <mark>eq</mark> uipment	
D.				sale or transfer which shoul	d be called to the attention of the Assess	or.)
			CERTIFI	CATION		
Prop Part	OWNERSHIP TYPE prietorship thership poration	including any accompa		ments, is true, correct and cor	fornia that the foregoing and all information nplete to the best of my knowledge and beli	
		IZED AGENT (typed or printed)			TITLE	
SIGN	ATURE OF ASSESSEE OR AL	ITHORIZED AGENT			DATE	
NAM	E OF ENTITY (typed or printed)				FEDERAL EMPLOYER ID NUMBER	
PREI	PARER'S NAME AND ADDRES	S (typed or printed)			TITLE	
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS						

