CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Vincent P. Kehoe County of Mariposa Assessor/Recorder 4982 10th St P.O. Box 35 Mariposa, CA 95338 Ph: (209) 966-2332 Fax: (209) 966-5719

BUYER/TRANSFEREE		_	RECORDING DATA			
MAILING A	DDRESS		te Recorded:			
SELLER/T	RANSFEROR	As	sessor's Identification N	umber:		
OLLLIGH			MB	PG	PCL	
MAILING A	DDRESS		ne Numbers:			
The law assesses Stateme that who the esta 90 days taxes ap but not if the pr roll and	LEASE RTANT NOTICE requires any transferee acquiring an interest in real 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 appu- 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 to exceed five thousand dollars (\$5,000) if the property is eligi operty is not eligible for the homeowners' exemption if that fai shall be collected like any other delinquent property taxes, an	ment with the Count t recorded, within 90 the statement shall aisal is filed. The fat penalty of either: (1 mership of the real pro- ble for the homeown lure to file was not v d be subject to the s	Twp:	roperty taxa r. The Char change in or s after the da Ownership \$100); or (2) I home, which ty thousand be added to ayment.	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	
	ANSFER INFORMATION (Check the appropriate boxes to indi	-			; property.)	
1. 🗌	Purchase (complete Sections B and C on the reverse side).		fer/addition solely betwee omestic partners, divorce		🗆 Yes 🗌 No	
2.	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession.		action only a correction sons or entities holding ti		🗌 Yes 🗌 No	
3.	Inheritance. Transfer by will or intestate succession. Date of death Relationship to deceased	15. If you hold title	to this property as a joint transferor also a joint ten	t tenant,	Yes No	
4. 🗌	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.	tenancy interes	action the termination of a st? fer between family memb		Yes No	
5. 🗌	Merger or stock acquisition.	related busines			🗌 Yes 🗌 No	
6.	Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage	under a deed o document?	of trust, mortgage, or othe	er similar	🗌 Yes 🗌 No	

- 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)

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

Yes No

🗌 Yes 🗌 No

Yes No

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

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

EF-502-G-R06-0516-22000138-2 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.	nterest 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 parce	əl:	Total ac	pres in the parcel:				
10.	Production rates at acquisition	pn: 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	Average producing depth: ft				
		eloped: Oil						
	Undeve	eloped: Oil		_bbl Gasmcf				
14.			s made to assist in	n establishing a purcha <mark>se</mark> price? 🔲 Yes 🔲 No				
15. C.	 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. b. If no, please explain in Section D how the purchase price was determined. 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 agreements. 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. c. The allocation to your company books of the total acquisition price, by specific items. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION Terms: Total purchase price: Cash to seller:							
D.	Source(s) of financing (bank, seller, etc.):							
CERTIFICATION								
Part	nership incl poration dec		cuments, 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. This 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" (TIME TELEPHONE NUMBER	E-MAIL ADDRESS						

