CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



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| BUYER/TRANSFEREE | | | RECORDING DATA | | | |
|---------------------------------|--|---|--------------------------|-----------------------|----------------------|--|
| | | | Date Recorded: | | | |
| MAILING ADDRESS | | | Document Numb | oer: | | |
| | | | Assessor's Ident | ification Number: | | |
| SELLER/TRANSFEROR | | | | MB PG | PCL | |
| MAILING ADDRESS | | | Phone Numbers: | | | |
| FIELD | LEASE | | Buyer: () | | | |
| FIELD | LEAJE | | Seller: | | | |
| IMPORTANT NOTIO | F P | | Sec: | Twp: | Rng: | |
| The law requires any transf | eree acquiring an interest in real prope | | | | | |
| | essor, to <mark>fi</mark> le a Chan <mark>g</mark> e in <mark>Ow</mark> nership Sta le time of recording or, if the transfer is r | | | | | |
| | nership has occurred by reason of deal | | | | | |
| the estate is probated, shall | be filed at the time the inventory and ap | praisal is filed. T | he failure to file a | Change in Ownersl | hip Statement within | |
| | ritten request by the Assesso <mark>r re</mark> sults in base year value reflecting the change in o | | | | | |
| | and dollars (\$5,000) if the property is eli | | | | | |
| if the property is not eligible | for the homeowners' exemption if that | fa <mark>ilu</mark> re t <mark>o f</mark> ile was | not willful. This p | enalty will be adde | | |
| | te any other delinquent property taxes, a | | | | ŀ | |
| A. TRANSFER INFORMA | TION (Check the appropriate boxes to in | dicate the metho | d by which you acq | uired an interest in | the property.) | |
| 1. Durchase (complete | Sections B and C on the reverse side). | _ | transfer/addition sol | | | |
| 2. Land Sales Contrac | t. A contract for the purchase of property | | ered domestic partne | ers, divorce settleme | ent, 🗌 Yes 🗌 No | |
| | tains legal title to it after the buyer takes | etc.? | | | | |
| possession. | | | transaction only a | | | |
| 3. Inheritance. Transfe | r by will or intestate succession. | name(s) | of persons or entitie | s holding title? | 🗌 Yes 🛄 No | |
| Date of death | by will of intestate succession. | 15. If you ho | ld title to this propert | y as a joint tenant, | | |
| Relationship to decea | ased | is the sel | ler or transferor also | a joint tenant? | 🗌 Yes 🛄 No | |
| 4. Trade or exchange. | Trade or exchange. The above described property has been | | transaction the term | ination of a joint | | |
| | for other real property or tangible personal | tenancy | interest? | | 🗌 Yes 🛄 No | |
| property. | | 17. Was this | transfer between fai | mily members or | | |
| | wisition | related b | usinesses? | | 🗌 Yes 🗌 No | |

- 5. Merger or stock acquisition.
- 6. **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:
 - (date) (date)
- 18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar Yes No document? 19. Was this document recorded to create, assign, Yes No or terminate a lender's interest in this property? 🗌 Yes 🗌 No 20. Has this property been transferred to a trust? If **yes**, is the trust: Revocable Irrevocable 21. If the trust is irrevocable, is the transferor or the 🗌 Yes 🗌 No transferor's spouse or registered domestic partner the sole present beneficiary? 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.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



EF-502-G-R06-0516-23000276-2 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 let | ter of intent signed: | Effe | Effective transfer date: | | | | |
| 4. | Closing date: | Recording doc | ument: Number: | Date: | | | | |
| 5. | - | number of person with purchasing firm who | | ransaction and would be available to answer question | າs | | | |
| 6. | Name, address, and phone | number of any consultants used in connec | ction with the transact | tion: | | | | |
| 7. | Interest acquired (please report decimal fractions out of total; e.g., 0.875 out of 1.000). Revenue interest: | | | | | | | |
| 8. | Number of wells: Producin | g Injection | All id | le Other | | | | |
| 9. | Productive acres in the parc | el: | Total acres i | n the parcel: | | | | |
| 10. | Production rates at acquisition | on: Oilb/d G | as | mcf/d Waterb/o | b | | | |
| | Price received for oil and ga | | \$/ | /b_Gas\$/mc | f | | | |
| 12. | Oil gravity: | API Gas: | btu/mcf Av | /erage producing depth: | ft | | | |
| | Proved reserves: Dev | | | Gas | ncf | | | |
| | | eloped: Oil | bbl | Gas | mcf | | | |
| 14. | | | | ablishing a purchase price? 🗌 Yes 🔲 No | | | | |
| 15. C. | most relied upon in estat b. If no, please explain in S Please enclose a copy of the a. The sales agreement or agreements. b. A complete listing of all a wells and related equipm c. The allocation to your co PURCHASE PRICE OR TR Terms: Total purchase price | Dishing the purchase price. Section D how the purchase price was deter a following: contract including all exhibits and amender sests acquired and liabilities assumed in the sent, separately. Impany books of the total acquisition price ANSFER AMOUNT INFORMATION e: | ermined. nents thereto, as well the acquisition, if not i , by specific items. Cash to | analyses. Please identify the analysis or appraisal as other related agreements or contracts, such as lo included in item 15a. Please list each lease, including seller: |] | | | |
| | | x, seller, etc.): | | | | | | |
| D. | Purchase price allocated to: | Fixed plant & equipment: | | Moveable equipment | | | | |
| | | CERTI | FICATION | | | | | |
| Part | nership inc poration de | | uments, is true, correct | te of California that the foregoing and all information here t and complete to the best of my knowledge and belief. 1 r. | | | | |
| NAM | E OF ASSESSEE OR AUTHORIZED A | GENT (typed or printed) | | TITLE | | | | |
| SIGN | ATURE OF ASSESSEE OR AUTHORI. | ZED AGENT | | DATE | | | | |
| NAME OF ENTITY (typed or printed) | | | | FEDERAL EMPLOYER ID NUMBER | | | | |
| PRE | PARER'S NAME AND ADDRESS (type | d or printed) | | TITLE | | | | |
| DAY" (| IME TELEPHONE NUMBER | E-MAIL ADDRESS | | | | | | |

