EF-502-G-R06-0516-23000125-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

501 Low Gap Road, Room 1020

MENDOCINO COUNTY ASSESSOR

Ukiah, CA 95482

Katrina Bartolomie

Telephone: (707) 234-6800 Fax: (707) 463-6597

File this statement by:

DUNED/TI	DANOFFRE		RECORDING DATA		
DUTEK/II	RANSFEREE				
MAILING ADDRESS			Date Recorded:		—
			Document Number:		-
SELLER/I	RANSFEROR		Assessor's Identification Number:	DCI	
			MB PG	PCL	
MAILING	ADDRESS		Phone Numbers:		
FIELD	LEASE		Buyer:		
FIELD	LEASE		Seller:		
	DTANT NOTICE		Sec: Twp: Rr	ng:	
IMPORTANT NOTICE				-41	
	v requires any tran <mark>sfe</mark> ree acq <mark>ui</mark> ring an i <mark>nte</mark> rest <mark>in real proper</mark> ed by the county assessor, to file a Change in Ownership State				
Statem	ent must be filed at the time of recording or, if the transfer is no	t reco	rded, within 90 days of the date of the change in or	wnership, e	except
	ere the change in ownership has occurred by reason of death				
	ate is probated, shall be filed at the time the inventory and app s 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				
but not	to exceed five thousand dollars (\$5,000) if the property is eligi	ible fo	r the homeowners' exemption or twenty thousand	dollars (\$20	0,000)
	roperty is not eligible for the homeowners' exemption if that fa			the assess	sment
	I shall be collected like any other delinquent property taxes, and RANSFER INFORMATION (Check the appropriate boxes to indi-	_		property.)	
1. 🗆	Purchase (complete Sections B and C on the reverse side).		Was this transfer/addition solely between spouses	, , , ,	
1. 🗀	Pulchase (complete Sections B and C on the reverse side).	10.	or registered domestic partners, divorce settlement,	Yes	□ No
2. 🔲	Land Sales Contract. A contract for the purchase of property		etc.?		
	in which the seller retains legal title to it after the buyer takes possession.	14	Was this transaction only a correction of the		
	possession.		name(s) of persons or entities holding title?	Yes	☐ No
3. 🗆	Inheritance. Transfer by will or intestate succession.	15	If you hold title to this property as a joint tenant,		
	Date of death	-15.	is the seller or transferor also a joint tenant?	☐ Yes [No
	Relationship to deceased	10	•		
4.	Trade or exchange. The above described property has been	16.	Was this transaction the termination of a joint	Yes	
	traded or exchanged for other real property or tangible personal		tenancy interest?	□ res L	NO
	property.	17.	Was this transfer between family members or		_
5.	Merger or stock acquisition.		related businesses?	Yes	l No
		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 transferred %.		document?	☐ Yes L	No
	(i.d.) Sierreu	19.	Was this document recorded to create, assign,		_
7.	Foreclosure or trustee sale.		or terminate a lender's interest in this property?	☐ Yes ☐	No
• 🗆	211	20.	Has this property been transferred to a trust?	Yes	☐ No
8. ∟	Gift.		If yes , is the trust: Revocable Irrevocable		
9.	Life estate.	21	If the trust is irrevocable, is the transferor or the		
·. —			transferor's spouse or registered domestic	☐ Yes [☐ No
10.	Reconveyance (pay-off).		partner the sole present beneficiary?		
_					
11.	Creation or assignment of a lease:	22.	Does this property revert to the transferor in		¬
_	(date)		12 years or less? (Clifford Trust)	☐ Yes	No
12.	Termination of a lease:		If you answered no to 21 or 22, attach a copy of t	the trust	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

agreement.

(date)



B.	PROPERTY INFORMATION (Complete each item as it app	ies to this transaction.)			
1.	Seller's name and address:				
2.	Field name: Lease nam	e: Parcel number:			
3.	Date sales agreement or letter of intent signed:	Effective transfer date:			
4.	Closing date: Date: 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	rea 0.875 out of 1.000)			
		Other working interest owners & percentages:			
8.	Number of wells: Producing Injection	n All idle Other			
	Productive acres in the parcel:	Total acres in the parcel:			
10.		b/d Gasb/d			
	Price received for oil and gas at acquisition: Oil	\$/b_ Gas\$/mcf			
12.	Oil gravity:API Gas:	btu/mcf Average producing depth: ft			
13.	Proved reserves: Developed: Oil	bbl Gas mcf			
		bbl Gas mcf			
14.		analyses made to assist in establishing a purchase price? Yes No			
	most relied upon in establishing the purchase price.	ions, cash flow projections or analyses. Please identify the analysis or appraisal			
15	b. If no , please explain in Section D how the purchase price				
15.	r leade chologe a copy of the following.	amendments thereto, as well as other related agreements or contracts, such as loan			
		umed in the acquisition, if not included in item 15a. Please list each lease, including			
C.	c. The allocation to your company books of the total acquise PURCHASE PRICE OR TRANSFER AMOUNT INFORMAT				
	Terms: Total purchase price:	Cash to seller:			
	Production and/or conventional loan(s):	Amount(s): Interest rate(s):			
	Source(s) of financing (bank, seller, etc.):				
D.	Purchase price allocated to: Fixed plant & equipment:	about the sale or transfer which should be called to the attention of the Assessor.)			
		CERTIFICATION			
	OWNERSHIP TYPE	CERTIFICATION			
Prop Part	prietorship I certify (or declare) under penalty of including any accompanying stateme poration declaration is binding on each and	perjury under the laws of the State of California that the foregoing and all information hereon, ints or documents, is true, correct and complete to the best of my knowledge and belief. This every co-owner and/or partner.			
NAMI	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	TITLE			
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE			
NAMI	E OF ENTITY (typed or printed)	FEDERAL EMPLOYER ID NUMBER			
PREF	PARER'S NAME AND ADDRESS (typed or printed)	TITLE			
DAYT	TIME TELEPHONE NUMBER E-MAIL ADDRESS	l I			

