CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Matthew R. Maynard Placer County Assessor 2980 Richardson Dr Auburn CA 95603 Phone: 530-889-4300 Fax: 530-889-4305 assessor@placer.ca.gov

BUYER/TRANSFEREE	RECORDING DATA
	Date Recorded:
MAILING ADDRESS	Document Number:
SELLER/TRANSFEROR	Assessor's Identification Number:
SELLER/TRANSFEROR	MB PG PCL
MAILING ADDRESS	Phone Numbers:
FIELD	Buyer: () Seller: ()
IMPORTANT NOTICE	Sec: Twp: Rng:
assessed by the county assessor, to file a Change in Ownership State Statement must be filed at the time of recording or, if the transfer is no 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 app 90 days from the date of a written request by the Assessor results in taxes applicable to the new base year value reflecting the change in ov but not to exceed five thousand dollars (\$5,000) if the property is eligi if the property is not eligible for the homeowners' exemption if that fa roll and shall be collected like any other delinquent property taxes, ar	the second s
A. TRANSFER INFORMATION (Check the appropriate boxes to ind	licate 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. Transfer by will or intestate succession.
 Date of death ______
 Relationship to deceased ______
- 4. Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.
- 5. Merger or stock acquisition.
- 6. **Partial interest transfer.** Was less than 100 percent of the property transferred? If **yes**, indicate the percentage transferred ______%.
- 8. Gift.
- 9. Life estate.
- 10. Reconveyance (pay-off).

12. Termination of a lease:

11. Creation or assignment of a lease:

	_	
addition of a spouse, divorce settlement, etc.?	Yes	L No
14. Was this transaction only a correction of the name(s) of persons or entities holding title to the property?	☐ Yes	
15. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?	🗌 Yes	
16. Was this transaction the termination of a joint tenancy interest?	🗌 Yes	
17. Was this transfer between family members or related businesses?	🗌 Yes	
18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	🗌 Yes	
19. Was this document recorded to create, assign, or terminate a lender's interest in this property?	🗌 Yes	
20. Has this property been transferred to a trust? If yes , is the trust: Revocable Irrevocable	🗌 Yes	🗌 No
21. If the trust is irrevocable, is the transferor or the		

- transferor's spouse the sole present beneficiary? \Box Yes \Box No

If you answered no to 21 or 22, attach a copy of the trust agreement.

(Please complete the reverse side.)

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)

EF-502-G-R05-1111-31000365-2 BOE-502-G (P2) REV. 5 (11-11)

B. 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:		Eff	ective transfer date:				
4.	Closing date:		Recording docur	nent: Number:	Date	9:			
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	se report decimal fraction	s out of total: e.g., 0.87	5 out of 1.000).					
	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: Pro	ducing	Injection	All i	dleO	ther			
9.	Productive acres in the	parcel:		Total acres	in the parcel:	<u> </u>			
10.	Production rates at acc	uisition: Oil	b/d Ga	s	mcf/d Water	b/d			
		nd gas at acquisition: O		۶ <u>ــــــــــــــــــــــــــــــــــــ</u>	β/b Gas	\$/mcf			
12.	Oil gravity:	API G	as:	btu/mcf A	verage producing depth:	ft			
13.	Proved reserves:	Developed: Oil		bb		mcf			
						mcf			
14.	Were appraisals, evalu	ations, cash flow projection	ons or ot <mark>her</mark> analyses <mark>n</mark>	hade to assist in es	tablishing a purchase price?	Yes No			
	most relied upon in	se copies of those appra establishing the purchase in in Section D how the pu	e price.		analyses. Please identify the	analy <mark>sis</mark> or appraisal			
15.	Please enclose a copy								
		a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as loan							
		f all assets acquired and quipment, separately.	liabilities assumed in th	e acquisition, if not	t included in item 15a. Please	list each lease, including			
 c. The allocation to your company books of the total acquisition price, by specific items. C. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION 									
	Terms: Total purchase	e price:		Cash t	o seller:				
	Production and/or conv	ventional loan(s):		Amount(s):	Int	erest rate(s):			
	Source(s) of financing	Source(s) of financing (bank, seller, etc.):							
		ed to: Fixed plant & equ			Moveable equipment				
D. REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assesso									
	_								
			CERTIF	CATION					
Part	OWNERSHIP TYPE prietorship mership poration er OWNERSHIP TYPE	including any accompar		ments, is true, corre	ate of California that the foregoi ct and complete to the best of n er.	•			
	E OF ASSESSEE OR AUTHOR	ZED AGENT (typed or printed)			TITLE				
SIGN	IATURE OF ASSESSEE OR AU	THORIZED AGENT			DATE				
NAM	E OF ENTITY (typed or printed)				FEDERAL EMPLOY	ER ID NUMBER			
PREI	PARER'S NAME AND ADDRESS	6 (typed or printed)			TITLE				
DAY ⁻		E-MAIL ADDRESS			1				

