CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Josie Gonzales

Assessor-Recorder-County Clerk County of San Bernardino Assessor's Office 222 W. Hospitality Lane - 4th Floor San Bernardino, CA 92415-0311 www.sbcounty.gov/arc Phone: (909) 387-8307 Toll Free: (877) 885-7654

BUYER/TRANSFEREE	RECORDING DATA
	Date Recorded:
MAILING ADDRESS	Document Number:
	Assessor's Identification Number:
SELLER/TRANSFEROR	MB PG PCL
MAILING ADDRESS	Phone Numbers:
	Buyer: ()
FIELD LEASE	Seller:
IMPORTANT NOTICE	Sec: Twp: Rng:
	perty or manufactured home subject to local property taxation, and that is tatement with the County Recorder or Assessor. The Change in Ownership
	not recorded, within 90 days of the date of the change in ownership, except
	ath the statement shall be filed within 150 days after the date of death or, it
	ppraisal is filed. The failure to file a Change in Ownership Statement within
	in a penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the ownership of the real property or manufactured home, whichever is greater.
	ligible for the homeowners' exemption or twenty thousand dollars (\$20,000)
if the property is not eligible for the homeowners' exemption if that	t failure to file was not willful. This pe <mark>na</mark> lty will be add <mark>e</mark> d to the assessment
roll and shall be collected like any other delinquent property taxes,	, and be subject to the same penalties for nonpayment.
A. TRANSFER INFORMATION (Check the appropriate boxes to i	indicate the method by which you acquired an interest in the property.)
1. Durchase (complete Sections B and C on the reverse side).	13. Was this transfer/addition solely between spouses
2. Land Sales Contract. A contract for the purchase of property	or registered domestic partners, divorce settlement, 🗌 Yes 🗌 No
in which the seller retains legal title to it after the buyer takes	etc.?
possession.	14. Was this transaction only a correction of the
	name(s) of persons or entities holding title?
 Inheritance. Transfer by will or intestate succession. Date of death 	15. If you hold title to this property as a joint tenant,
Relationship to deceased	is the seller or transferor also a joint tenant?
·	16. Was this transaction the termination of a joint
4. Trade or exchange. The above described property has been traded or exchanged for other real property or tangible persons	
 Trade or exchange. The above described property has been traded or exchanged for other real property or tangible persona property. 	

- 5. Merger or stock acquisition.
- 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:

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

Yes No

Yes No

🗌 Yes 🗌 No

🗌 Yes 🗌 No

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

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

document?

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)

EF-502-G-R06-0516-36000283-2 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 letter of intent signed:		Effec	tive transfer date:			
4.	Closing date:	Recording docur	nent: Number:	Date:			
5.							
6.	Name, address, and phone number of any consultants used in connection with the transaction:						
7.	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: Producing	Injection		e Other			
	Productive acres in the parcel:		Total acres in	the parcel:			
10.	Production rates at acquisition: Oil	b/d Ga	s	mcf/d Water	b/d		
	Price received for oil and gas at acquisition: Oi		\$/b	Gas	\$/mcf		
12.	Oil gravity: API Ga	as:	btu/mcf Ave	rage producing depth:	ft		
	Proved reserves: Developed: Oil		bbl	Gas	mcf		
	Undeveloped: Oil —		bbl	Gas	mcf		
14.	Were appraisals, evaluations, cash flow projection	ons or other analyses m	ade to assist in estal	olishing a purchase price? 🔲 Yes	🗆 No		
15.	 a. If yes, please enclose copies of those appraimost relied upon in establishing the purchase b. If no, please explain in Section D how the purchase enclose a copy of the following: 	e price.		nalyses. Please identify the analysis	or appraisal		
a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such a agreements.							
	b. A complete listing of all assets acquired and wells and related equipment, separately.			cluded in item 15a. Please list each	lease, including		
C.	 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 s	seller:			
	Production and/or conventional loan(s):		Amount(s):	Interest rate	e(s):		
	Source(s) of financing (bank, seller, etc.):						
D.	Purchase price allocated to: Fixed plant & equipment: Moveable equipment Moveable equipment REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)						
		CERTIFI	CATION				
Part	nership including any accompan poration declaration is binding	er penalty of perjury unde	er the laws of the State ments, is true, correct a	of California that the foregoing and all and complete to the best of my knowle			
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)			TITLE			
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT				DATE	DATE		
NAME OF ENTITY (typed or printed)				FEDERAL EMPLOYER ID NUM	FEDERAL EMPLOYER ID NUMBER		
PREPARER'S NAME AND ADDRESS (typed or printed)				TITLE			
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS						
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