CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Steve J. Bestolarides Assessor-Recorder-County Clerk San Joaquin County

San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Telephone (209) 468-2658 www.sjgov.org/assessor_recorder

BUYER/TRANSFEREE		RECORDING DATA	RECORDING DATA	
		Date Recorded:		
MAILING A	DDRESS	Document Number:		
	RANSFEROR	Assessor's Identification Number:		
SELLER/II	TANSFEROR	MB PG	PCL	
MAILING A	DDRESS	Phone Numbers:		
		Buyer: ()		
FIELD	LEASE	Seller:		
IMPO		Sec: Twp: Rn	ng:	
_	requires any transferee acquiring an interest in real property	or manufactured home subject to local property taxa	tion, and that is	
	ed by the county assessor, to file a Change in Ownership Stater			
	ent must be filed at the time of recording or, if the transfer is not			
	ere the change in ownership has occurred by reason of death t te is probated, shall be filed at the time the inventory and appra			
	from the date of a written request by the Assessor results in a			
	oplicable to the new base year value reflecting the change in own			
but not	to exceed five thousand dollars (\$5,000) if the property is eligib	le for the homeowners' exemption or twenty thousand	dollars (\$20,000)	
•	operty is not eligible for the homeowners' exemption if that fail		the assessment	
	shall be collected like any other delinquent property taxes, and			
A. TR	ANSFER INFORMATION (Check the appropriate boxes to indic	ate the method by which you acquired an interest in the	property.)	
1.	Purchase (complete Sections B and C on the reverse side).	13. Was this transfer/addition solely between spouses 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	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.			
	Date of death	15. If you hold title to this property as a joint tenant,	🗌 Yes 🗌 No	
	Relationship to deceased	is the seller or transferor also a joint tenant?		
4.	Trade or exchange. The above described property has been	16. Was this transaction the termination of a joint		
	traded or exchanged for other real property or tangible personal	tenancy interest?	🗌 Yes 🛄 No	
	property.	17. Was this transfer between family members or		
5.	Merger or stock acquisition.	related businesses?	🗌 Yes 📙 No	
О. Ш		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	document?	🗌 Yes 🗌 No	
	transferred %.	10 Mas this document recorded to prosts posing		
- □		19. Was this document recorded to create, assign, or terminate a lender's interest in this property?	Yes No	
7. 🗌	Foreclosure or trustee sale.	or terminate a lender's interest in this property?		
8. 🗌	Gift.	20. Has this property been transferred to a trust?	🗌 Yes 🗌 No	
<u>.</u> . Ш		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?		

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.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)



11. Creation or assignment of a lease:

12. Termination of a lease:

EF-502-G-R06-0516-39000028-2 BOE-502-G (P2) REV. 6 (05-16)

B. PROPERTY INFORMATION (Complete each item as it applies to this transaction.)

3. D 4. C	Date sales agreement or letter of intent si	igned:	Parcel number: _ Effective transfer date:			
4. C	Closing date:	•	Effective transfer date:			
	•					
	•	Recording document: Numbe	r: Date:			
	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. N	Name, address, and phone number of any consultants used in connection with the transaction:					
7. Ir	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. N	lumber of wells: Producing		All idle Other			
	Productive acres in the parcel:		acres in the parcel:			
10. P	roduction rates at acqui <mark>siti</mark> on: Oil	b/d Gas	mcf/d Waterb/d			
	rice received for oil an <mark>d g</mark> as at ac <mark>qu</mark> isitic		\$/b_ Gas\$/mcf			
12. O	Dil gravity: A	NPI Gas: btu/m	cf Average producing depth: ft			
		il	bbl Gasmcf			
	Undeveloped: Oi	il	bbl Gasmcf			
14. W			in establishing a purchase price? 🔲 Yes 🔲 No			
b. 15. Pl a. b. c. C. P l Te	 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:					
P	roduction and/or conventional loan(s): _	Amount(s): _	Interest rate(s):			
S	ource(s) of financing (bank, seller, etc.):					
	Purchase price allocated to: Fixed plant EMARKS (<i>Please include below any ad</i>		Moveable equipment			
		CERTIFICATION				
	rship including any acc ration declaration is but	re) under penalty of perjury under the laws of t	he State of California that the foregoing and all information hereon, correct and complete to the best of my knowledge and belief. This partner.			
	DF ASSESSEE OR AUTHORIZED AGENT (typed or p	printed)	TITLE			
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT			DATE			
NAME OF ENTITY (typed or printed)			FEDERAL EMPLOYER ID NUMBER			
PREPARER'S NAME AND ADDRESS (typed or printed)			TITLE			
DAYTIME (E TELEPHONE NUMBER E-MAIL ADDRI	ESS				

