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 Number:
	Assessor's Identification Number:
SELLER/TRANSFEROR	MB PG PCL
MAILING ADDRESS	Phone Numbers:
FIELD	Buyer: () Seller: () Sec: Twp: Rng:
IMPORTANT NOTICE The law requires any transferee acquiring an interest in real property assessed by the county assessor, to file a Change in Ownership Stater Statement must be filed at the time of recording or, if the transfer is not that where the change in ownership has occurred by reason of death to the estate is probated, shall be filed at the time the inventory and appra 90 days from the date of a written request by the Assessor results in a taxes applicable 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 if the property is not eligible for the homeowners' exemption if that fail roll and shall be collected like any other delinquent property taxes, and	nent with the County Recorder or Assessor. The Change in Ownership recorded, within 90 days of the date of the change in ownership, except the statement shall be filed within 150 days after the date of death or, if hisal is filed. The failure to file a Change in Ownership Statement within penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the tership of the real property or manufactured home, whichever is greater, le for the homeowners' exemption or twenty thousand dollars (\$20,000) ure to file was not willful. This penalty will be added to the assessment be subject to the same penalties for nonpayment.
A. TRANSFER INFORMATION (Check the appropriate boxes to indic	ate 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/addition solely between spouses or registered domestic partners, divorce settlement, Yes No etc.? 14. Was this transaction only a correction of the name(s) of persons or entities holding title? Yes No

- 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. Derived 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)

	under a deed of trust, mortgage, or other similar document?	🗌 Yes	🗌 No
19.	Was this document recorded to create, assign, 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	☐ Yes	🗌 No
21.	If the trust is irrevocable, is the transferor or the transferor's spouse or registered domestic partner the sole present beneficiary?	🗌 Yes	🗌 No
22.	Does this property revert to the transferor in 12 years or less? (<i>Clifford Trust</i>)	🗌 Yes	🗌 No

🗌 Yes 🗌 No

🗌 Yes 🗌 No

Yes No

15. If you hold title to this property as a joint tenant,

is the seller or transferor also a joint tenant?

16. Was this transaction the termination of a joint

17. Was this transfer between family members or

18. Was this document recorded to substitute a trustee

tenancy interest?

related businesses?

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-R06-0516-44000040-2 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:		
		•	h the transaction and would be available to answer questions		
6. N	Name, address, and phone number of any consultants used in connection with the transaction:				
7. Ir	nterest acquired (please report decimal fi	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	 most relied upon in establishing the puicture. If no, please explain in Section D how please enclose a copy of the following: The sales agreement or contract incluing agreements. A complete listing of all assets acquire wells and related equipment, separate the allocation to your company books purchase price OR TRANSFER AM terms: Total purchase price: 	urchase price. y the purchase price was determined. adding all exhibits and amendments thereto, a ed and liabilities assumed in the acquisition, ely. s of the total acquisition price, by specific ite IOUNT INFORMATION	ash to seller:		
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			
PREPAR	RER'S NAME AND ADDRESS (typed or printed)		TITLE		
DAYTIME (E TELEPHONE NUMBER E-MAIL ADDRI	ESS			

