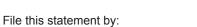
EF-502-G-R06-0516-52000207-1 BOE-502-G (P1) REV. 6 (05-16)

## CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY





## Kenneth L. Brown County of Tehama Assessor

☐ Yes ☐ No

444 Oak Street - Room B P. O. Box 428 Red Bluff, CA 96080 (530) 527-5931 Fax (530) 529-4019

BUYER/TRANSFEREE			RECORDING DATA		
MAILING A	ADDRESS		Date Recorded: Document Number:		_
SELLER/T	RANSFEROR		Assessor's Identification Number	er: G PCL	
MAILING	ADDRESS		Phone Numbers:		
FIELD	DRTANT NOTICE		Seller: Twp:	Rng:	
Statement that who the esta 90 days taxes a but not if the process.	ed by the county assessor, to file a Change in Ownership State 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 ate is probated, shall be filed at the time the inventory and apply 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 to exceed five thousand dollars (\$5,000) if the property is eligit roperty is not eligible for the homeowners' exemption if that fall shall be collected like any other delinquent property taxes, and	of recorded, with the statement raisal is filed. a penalty of eith record for the hon illure to file was	hin 90 days of the date of the chan shall be filed within 150 days afte The failure to file a Change in Own ner: (1) one hundred dollars (\$100) real property or manufactured homeowners' exemption or twenty the not willful. This penalty will be a	ge in ownership, e er the date of death ership Statement v ; or (2) 10 percent ne, whichever is gr busand dollars (\$2) dded to the assess	except h or, if within of the reater, 20,000)
A. TR	RANSFER INFORMATION (Check the appropriate boxes to indi	icate the metho	od by which you acquired an interes	st in the property.)	
1. 2.	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.	or regist etc.? 14. Was this	s transfer/addition solely between spo ered domestic partners, divorce settle s transaction only a correction of the	ement, Yes	
3.	Inheritance. Transfer by will or intestate succession.  Date of death  Relationship to deceased	15. If you ho	of persons or entities holding title? old title to this property as a joint tena eller or transferor also a joint tenant?	☐ Yes ☐ Yes ☐	
4.	<b>Trade or exchange.</b> The above described property has been traded or exchanged for other real property or tangible personal property.	tenancy	s transaction the termination of a joint interest?	☐ Yes ☐	□ No
5.	Merger or stock acquisition.	related t	pusinesses?	☐ Yes ☐	☐ No
6.	Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage transferred %.		document recorded to substitute a to deed of trust, mortgage, or other sim nt?		□ No
7.	Foreclosure or trustee sale.		s document recorded to create, assignate a lender's interest in this propert	. — -	□ No
8.	Gift.		property been transferred to a trust? is the trust: Revocable Irrev		☐ No
9.	Life estate.	transfero	st is irrevocable, is the transferor or too's spouse or registered domestic	the	☐ No
10. L	Reconveyance (pay-off).  Creation or assignment of a lease:		the sole present beneficiary? s property revert to the transferor in		

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

12 years or less? (Clifford Trust)

agreement.

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



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12. Termination of a lease: \_\_\_

В.	PROPERTY INFORMATION (Complete each item as it appl	lies to this transaction.)			
1.	Seller's name and address:				
2.	Field name: Lease name	e: Parcel number:			
3.	Date sales agreement or letter of intent signed:	Effective transfer date:			
4.	Closing date: Recor	rding document: Number: Date:			
5.	Name, address and phone number of person with purchasing relative to the transaction:	g firm who is familiar with the transaction and would be available to answer	questions		
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,	; e.g., 0.875 out of 1.000).			
	Revenue interest: Working interest:	Other working interest owners & percentages:			
8.	Number of wells: Producing Injectio	on All idle Other			
9.	Productive acres in the parcel:	Total acres in the parcel:			
10.	Production rates at acquisition: Oil		b/d		
	Price received for oil and gas at acquisition: Oil	\$/b Gas	\$/mcf		
	Oil gravity:API Gas:		ft		
	Proved reserves: Developed: Oil	bbl Gas	mcf		
	Undeveloped: Oil —		mcf		
14.		analyses made to assist in establishing a purchase price?			
15. <b>C</b> .	most relied upon in establishing the purchase price.  b. If no, please explain in Section D how the purchase price.  Please enclose a copy of the following:  a. The sales agreement or contract including all exhibits and agreements.  b. A complete listing of all assets acquired and liabilities ass wells and related equipment, separately.  c. The allocation to your company books of the total acquisite purchase price or transfer amount information.  Terms: Total purchase price:	d amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such amendments thereto, as well as other related agreements or contracts, such as the second of the s	ich as Ioan		
	. ,	Amount(s): Interest rate(s):			
	Source(s) of financing (bank, seller, etc.):				
D.	Purchase price allocated to: Fixed plant & equipment:	Moveable equipmentabout the sale or transfer which should be called to the attention of the Ass			
		CERTIFICATION			
Pari Cor Oth	nership including any accompanying statement declaration is binding on each and er				
NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	TITLE			
SIGN	ATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE			
NAM	E OF ENTITY (typed or printed)	FEDERAL EMPLOYER ID NUMBER			
PRE	PARER'S NAME AND ADDRESS (typed or printed)	TITLE			
DAY (	TIME TELEPHONE NUMBER E-MAIL ADDRESS				

