CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

11. Creation or assignment of a lease:

12. Termination of a lease: _

File this statement by:



Shanna White County Clerk-Recorder-Assessor P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

				RECORDING]
BUYER/TRANSFEREE			RECORDING DATA			
MAILING A	ADDRESS		Date Recorded: Document Numb			
			Assessor's Ident			
SELLER/T	RANSFEROR				PG PC	:1
			Phone Numbers:			
MAILING A	NDRESS					
FIELD	LEASE		Buyer: ()			
			Seller:			
			Sec:	Twp:	Rng:	
-	requires any transferee acquiring an interest in real propert	ty or manufactu	red home subject	to local prope	erty taxation, a	nd that is
assesse	ed by the county assessor, to file a Change in Ownership State	ement with the C	county Recorder o	r Assessor. Th	he C <mark>ha</mark> nge in O	wnership
	ent must be filed at the time of recording or, if the transfer is no					
	ere the change in ownership has occurred by reason of death te 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 a	a penalty of eithe	er: (1) one hundred	d d <mark>oll</mark> ars (\$100)	; or (2) 10 perc	ent of the
	oplicable to the new base year value reflecting the change in ow					
	to exceed five thousand dollars (\$5,000) if the property is eligi operty is not eligible for the homeowners' exemption if that fa					
	shall be collected like any other delinquent property taxes, an					Jegginent
A. TR	ANSFER INFORMATION (Check the appropriate boxes to ind	icate the method	l by which you acq	uired an intere	st in the proper	ty.)
1. 🗌	Purchase (complete Sections B and C on the reverse side).		transfer/addition so	-		Π
2.	Land Sales Contract. A contract for the purchase of property		red domestic partne	ers, divorce sett	lement, L Ye	s 🗌 No
	in which the seller retains legal title to it after the buyer takes	etc.?				
	possession.		transaction only a			s 🗌 No
3. 🗌	Inheritance. Transfer by will or intestate succession.		of persons or entitie			
	Date of death	-	d title to this proper			Π
	Relationship to deceased	is the sell	er or transferor also	a joint tenant?	🗌 Ye	s 🗌 No
4.	Trade or exchange. The above described property has been	16. Was this	transaction the term	nination of a join	t	_
	traded or exchanged for other real property or tangible personal	tenancy in	nterest?		L Ye	s 🗌 No
	property.	17. Was this	t <mark>ransfer betwee</mark> n fa	mily members o	r	
5. 🗌	Merger or stock acquisition.	related bu	isinesses?		🗌 Ye	s 🗌 No
0.		18. Was this	document recorded	to substitute a t	trustee	
6.	Partial interest transfer. Was less than 100 percent of the	under a d	eed of trust, mortga	ige, or other sim	nilar	_
	property transferred? If yes, indicate the percentage	documen	t?		L Ye	s 🗌 No
	transferred%.	19. Was this	document recorded	to create, assig	ın,	
7. 🗌	Foreclosure or trustee sale.		ate a lender's intere	-		s 🗌 No
_		20. Has this r	property been transf	ferred to a trust?	? 🗌 Ye	s 🗌 No
8.	Gift.		s the trust: Revocable Irrevocable			
₀ □	Life estate.	-				
э. 🗆	LIIE ESIALE.		t is irrevocable, is th 's spouse or registe			s 🗌 No
10. 🗌	Reconveyance (pay-off).		e sole present bene			
	• v • /	Partier th				

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)

EF-502-G-R06-0516-53000270-2 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 lette	er of intent signed:	Effe	Effective transfer date:					
4.	Closing date:	Recording do	cument: Number:	Date:					
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 n	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	Injection	All id	le Other					
9.	Productive acres in the parce	il:	Total acres i	n the parcel:					
10.	Production rates at acquisitio	n: Oilb/d	Gas	mcf/d Water	b/d				
11.	Price received for oil and gas	at acquisition: Oil	\$/	b Gas	\$/mcf				
	Oil gravity:				ft				
		eloped: Oil			mcf				
		eloped: Oil							
14				ablishing a purchase price?					
15.	 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.	PURCHASE PRICE OR TRA	npany books of the total acquisition pric INSFER AMOUNT INFORMATION		seller:					
				Interest rate(s):					
		seller, etc.):							
		Fixed plant & equipment:		Aoveable equipment					
D.				ch should be called to the attention of the A					
		CERT	IFICATION						
Part	nership inclusion inclusion dec		cuments, is true, correc	te of California that the foregoing and all inform t and complete to the best of my knowledge ar r.					
	E OF ASSESSEE OR AUTHORIZED AG	GENT (typed or printed)		TITLE					
SIGN	IATURE OF ASSESSEE OR AUTHORIZ	ED AGENT		DATE					
NAME OF ENTITY (typed or printed)				FEDERAL EMPLOYER ID NUMBER					
PREPARER'S NAME AND ADDRESS (typed or printed)				TITLE					
DAY" (TIME TELEPHONE NUMBER	E-MAIL ADDRESS							
		1							

