CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:

12. Termination of a lease: _



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

BUYER/T	RANSFEREE	RECORDING DATA			
		Date Recorded:			
MAILING	ADDRESS	Document Number:			
SELLED/	TRANSFEROR	Assessor's Identification Number:			
JELLER/	INANSFERUK	MB PG PCL			
MAILING	ADDRESS	Phone Numbers:			
		Buyer: ()			
FIELD	LEASE	Seller:			
IMPC	ORTANT NOTICE	Sec: Twp: Rng:			
		y or manufac <mark>tu</mark> red home subject to local property taxation, and that is			
		ment with the County Recorder or Assessor. The Change in Ownership			
		t 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			
		raisal 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			
		nership of the real property or manufactured home, whichever is greater, ble for the homeowners' exemption or twenty thousand dollars (\$20,000)			
		lure to file was not willful. This penalty will be added to the assessment			
	d shall be collected like any other delinquent property taxes, and				
A. TF	RANSFER INFORMATION (Check the appropriate boxes to indic	cate 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 in which the seller retains legal title to it after the buyer takes	etc.?			
	possession.	14. Was th <mark>is</mark> transaction only a correction of the			
- L		name(s) of persons or entities holding title?			
3. ∟	Inheritance. Transfer by will or intestate succession.	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	tenancy interest?			
	traded or exchanged for other real property or tangible personal property.	17. Was this transfer between family members or			
_		related businesses?			
5. 🗆	Merger or stock acquisition.				
6.	Partial interest transfer. Was less than 100 percent of the	 Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar 			
0.	property transferred? If yes , indicate the percentage	document?			
	transferred %.				
	1 –	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 Ves No			
. С		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 \Box Yes \Box No			
10.	Reconveyance (pay-off).	partner the sole present beneficiary?			
		22. Does this property revert to the transferor in			
11. ∟	Creation or assignment of a lease:				

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-R06-0516-53000201-2 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 signe	ed:	Effec	Effective transfer date:				
4.	Closing date:	Recording docum	nent: Number:	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.	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: Other working interest owners & percentages:							
8.	Number of wells: Producing	Injection	All idle	e Other	r			
9.	Productive acres in the parcel:		Total acres in	the parcel:				
10.	Production rates at acquisition: Oil	b/d Gas	s	mcf/d Water	b/d			
	Price received for oil and gas at acquisition:		\$/b	Gas	\$/mcf			
12.	Oil gravity: API	Gas:	btu/mcf Ave	erage producing depth:	ft			
	Proved reserves: Developed: Oil		bbl	Gas	mcf			
	Undeveloped: Oil —		bbl	Gas	mcf			
14.	Were appraisals, evaluations, cash flow proje	ctions or other analyses m	ade to assist in estal	blis <mark>hi</mark> ng a purcha <mark>se</mark> price?	Yes 🗌 No			
	 a. If yes, please enclose copies of those approximate most relied upon in establishing the purch b. If no, please explain in Section D how the 	ase price.		nalyses. Please identify the an	aly <mark>sis</mark> or appraisal			
15.	 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 loa agreements. 							
	 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.	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):	Intere	st rate(s):			
	Source(s) of financing (bank, seller, etc.):							
	Purchase price allocated to: Fixed plant & e			oveable equipment				
D.	EMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)							
		CERTIFI	CATION					
Part Cor	including any accomporation declaration is bindi	under penalty of perjury unde	r the laws of the State nents, is true, correct a	e of California that the foregoing a and complete to the best of my k				
Oth NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed	<i>d</i>)		TITLE				
SIGN	IATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE						
NAM	E OF ENTITY (typed or printed)	FEDERAL EMPLOYER	FEDERAL EMPLOYER ID NUMBER					
PREI	PARER'S NAME AND ADDRESS (typed or printed)	TITLE						
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS							
()							

