CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



JOEL BUTLER YOLO COUNTY ASSESSOR

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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: ()
IMPORTANT NOTICE	Sec: Twp: Rng:
The law requires any transferee acquiring an interest in real property or n assessed by the county assessor, to file a Change in Ownership Statement Statement must be filed at the time of recording or, if the transfer is not reco that where the change in ownership has occurred by reason of death the st the estate is probated, shall be filed at the time the inventory and appraisal 90 days from the date of a written request by the Assessor results in a pena taxes applicable to the new base year value reflecting the change in ownersh but not to exceed five thousand dollars (\$5,000) if the property is eligible for if the property is not eligible for the homeowners' exemption if that failure to roll and shall be collected like any other delinquent property taxes, and be	with the County Recorder or Assessor. The Change in Ownership rded, within 90 days of the date of the change in ownership, except tatement shall be filed within 150 days after the date of death or, if is filed. The failure to file a Change in Ownership Statement within ity of either: (1) one hundred dollars (\$100); or (2) 10 percent of the ip of the real property or manufactured home, whichever is greater, r the homeowners' exemption or twenty thousand dollars (\$20,000) o file was not willful. This penalty will be added to the assessment
A. TRANSFER INFORMATION (Check the appropriate boxes to indicate the	he method by which you acquired an interest in the property.)
2. Land Sales Contract. A contract for the purchase of property	Was this transfer solely between husband and wife, addition of a spouse, divorce settlement, etc.? Yes No Was this transaction only a correction of the name(s) of persons or entities holding title to
3. Inheritance. Transfer by will or intestate succession. Date of death	the property? Yes No If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant? Yes No
 Irade or exchange. The above described property has been traded or exchanged for other real property or tangible personal 	Was this transaction the termination of a joint tenancy interest?

- 5. Merger or stock acquisition.
- 6. **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:
- Was this transfer between family members or 🗌 Yes 🗌 No related businesses? 18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar Yes No document? 19. Was this document recorded to create, assign, Yes No 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 21. If the trust is irrevocable, is the transferor or the 🗌 Yes 🗌 No transferor's spouse the sole present beneficiary?
- 22. Does this property revert to the transferor in 12 years or less? (Clifford Trust)

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

(Please complete the reverse side.)

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

(date)



EF-502-G-R05-1111-57000335-2 BOE-502-G (P2) REV. 5 (11-11)

В.	PROPERTY INFORMATION	(Complete each item as it applies to this transaction.)	
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1.	Seller's name and address: _						
2.	Field name:	Lease name:	Parcel number:				
3.	Date sales agreement or lette	er of intent signed:	: Effective transfer date:				
4.	Closing date:	Recording docume	nt: 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: Working interest: Other working interest owners & percentages:						
8.	Number of wells: Producing	Injection	All idle Othe	r			
9.	Productive acres in the parce	l:	_ Total acres in 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:		btu/mcf Average producing depth:	ft			
		eloped: Oil					
		•	bbl Gas				
14			le to assist in establishing 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. 5. 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 						
C.	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: Cash to seller:						
			mount(s): Intere	est rate(s):			
D.	Source(s) of financing (bank, seller, etc.):Purchase price allocated to: Fixed plant & equipment: Moveable equipment REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)						
	·	CERTIFIC	ATION				
Prop Part	nership inclusion inclusico inclusico inclusico inclusico inclusico inclusico inclusio	rtify (or declare) under penalty of perjury under	he laws of the State of California that the foregoing nts, is true, correct and complete to the best of my l				
	E OF ASSESSEE OR AUTHORIZED AG	ENT (typed or printed)	TITLE				
SIGN	ATURE OF ASSESSEE OR AUTHORIZ	ED AGENT	DATE				
NAME OF ENTITY (typed or printed)			FEDERAL EMPLOYER	ID NUMBER			
PREF	PARER'S NAME AND ADDRESS (typed	or printed)	TITLE				
DAYT	IME TELEPHONE NUMBER	E-MAIL ADDRESS					

