CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



YOLO COUNTY COUNTY ASSESSOR

625 Court St, Rm. 104 Woodland, CA 95695 Woodland/Davis (530) 666-8135 West Sacramento (916) 375-6496 Fax (530) 666-8213 assessor@yolocounty.org

BUYER/TRANSFEREE	RECORDING DATA			
	Date Recorde	d:		
MAILING ADDRESS	Document Nu	mber:		
SELLER/TRANSFEROR	Assessor's Ide	entification I	Number:	
SELLERVIKANSPEROK		MB	PG	PCL
MAILING ADDRESS	Phone Number	'S:		
	Buyer:)	_	
FIELD	Seller:)		
IMPORTANT NOTICE	Sec:	_ Twp:	Ri	ng:
The law requires any transferee acquiring an interest in real property or manufactur assessed by the county assessor, to file a Change in Ownership Statement with the				,
Statement must be filed at the time of recording or, if the transfer is not recorded, with			•	
that where the change in ownership has occurred by reason of death the statement the estate is probated, shall be filed at the time the inventory and appraisal is filed.				
90 days from the date of a written request by the Assessor results in a penalty of eith		•		
taxes applicable to the new base year value reflecting the change in ownership of the r	· ·			
but not to exceed five thousand dollars (\$5,000) if the property is eligible for the hom				
if the property is not eligible for the homeowners' exemption if that failure to file was				o the assessment
roll and shall be collected like any other delinquent property taxes, and be subject to	the same penalt	ies for non	payment.	

A. TRANSFER INFORMATION (Check the appropriate boxes to indicate the method by which you acquired an interest 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	13.	Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement, etc.?	🗌 Yes	🗌 No
3. 🗌	in which the seller retains legal title to it after the buyer takes possession. Inheritance. Transfer by will or intestate succession. Date of death Relationship to deceased		Was this transaction only a correction of the name(s) of persons or entities holding title? If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?	□ Yes	□ No
4. 🗌	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.		Was this transaction the termination of a joint tenancy interest? Was this transfer between family members or	🗌 Yes	🗌 No
5. 🗌	Merger or stock acquisition.		related businesses?	🗌 Yes	🗌 No
6. 🗌	Partial interest transfer. Was less than 100 percent of the property transferred? If yes , indicate the percentage	18.	Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	☐ Yes	🗌 No
7. 🗌	transferred %. Foreclosure or trustee sale.	19.	Was this document recorded to create, assign, or terminate a lender's interest in this property?	🗌 Yes	🗌 No
8. 🗌	Gift.	20.	Has this property been transferred to a trust? If yes , is the trust: Revocable Irrevocable	☐ Yes	🗌 No
9. 🗌	Life estate.	21.	If the trust is irrevocable, is the transferor or the		—
10. 🗌	Reconveyance (pay-off).		transferor's spouse or registered domestic partner the sole present beneficiary?	∐ Yes	∐ No
11. 🗌	Creation or assignment of a lease:	22.	Does this property revert to the transferor in 12 years or less? (<i>Clifford Trust</i>)	🗌 Yes	🗌 No
12. 🗌	Termination of a lease:		If you answered no to 21 or 22, attach a copy of t agreement.	he trust	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

EF-502-G-R06-0516-57000626-2 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:		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	number of any consultants used in conne	ection with the tran	nsaction:			
7.		ort decimal fractions out of total; e.g., 0. Working interest:		working interest owners & percentages:			
8.	Number of wells: Producing	Injection	A	All idle Other			
9.	Productive acres in the parce	əl:	Total ac	pres in the parcel:			
10.	Production rates at acquisitio	pn: Oilb/d	Gas	mcf/d Waterb/d			
11.	Price received for oil and gas	at acquisition: Oil		\$/b_Gas\$/mcf			
12.	Oil gravity:	API Gas:	btu/mcf	f Average producing depth:ft			
		eloped: Oil					
	Undeve	eloped: Oil		_ bbl Gasmcf			
14.			s made to assist in	n establishing a purchase price? 🔲 Yes 🔲 No			
15. C.	 most relied upon in estable. If no, please explain in September 2015 Please enclose a copy of the a. The sales agreement or considered agreements. A complete listing of all as wells and related equipments. The allocation to your corsection of the sales agreement or considered agreements. The allocation to your corsection of the sales agreement of the sales agreement or considered agreements. The allocation to your consection of the sales agreement or consection. The allocation to your consection of the sales agreement of the sales ag	lishing the purchase price. ection D how the purchase price was de following: contract including all exhibits and amend seets acquired and liabilities assumed in ent, separately. npany books of the total acquisition price ANSFER AMOUNT INFORMATION e:	termined. Iments thereto, as In the acquisition, if e, by specific items	s or analyses. Please identify the analysis or appraisal well as other related agreements or contracts, such as loan not included in item 15a. Please list each lease, including s. sh to seller: Interest rate(s):			
		seller, etc.):					
D.	Purchase price allocated to:	Fixed plant & equipment:		Moveable equipment which should be called to the attention of the Assessor.)			
		CERT	IFICATION				
Part	nership inclusion inclusico inclusico inclusico inclusico inclusico inclusico inclusio	rtify (or declare) under penalty of perjury u	nder the laws of the ocuments, is true, co	e State of California that the foregoing and all information hereon, orrect and complete to the best of my knowledge and belief. This artner.			
	E OF ASSESSEE OR AUTHORIZED AG	GENT (typed or printed)		TITLE			
SIGN	ATURE OF ASSESSEE OR AUTHORIZ	ZED 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					

