EF-502-G-R06-0516-27000196-1 BOE-502-G (P1) REV. 6 (05-16)

## CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



## **Xochitl Marina Camacho Monterey County Assessor**

P. O. Box 570

Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435 assessor@co.monterey.ca.us

BUY	ER/TR	ANSFEREE		RECORDING DATA			
				Date Recorded:			
MAIL	_ING A	DDRESS		Document Number:			
SFLI	FR/TE	RANSFEROR		Assessor's Identification Number:			
OLLI	LLIVII	VANOI ETOT		MB PG PCL			
MAIL	ING A	DDRESS		Phone Numbers:			
				Buyer: ( )			
FIEL	D	LEASE		Buyer: ( ) Seller: ( )			
IM	PO	RTANT NOTICE		Sec: Twp: Rng:			
Sta tha the 90 c tax but if th	teme t whe esta days es ap not n	ent must be filed at the time of recording or, if the transfere the change in ownership has occurred by reason of the is probated, shall be filed at the time the inventory at from the date of a written request by the Assessor resupplicable to the new base year value reflecting the change to exceed five thousand dollars (\$5,000) if the property	er is not reco f death the sind appraisal alts in a pena e in ownersh is eligible for that failure to	It with the County Recorder or Assessor. The Change in Ownership corded, within 90 days of the date of the change in ownership, except statement shall be filed within 150 days after the date of death or, if I is filed. The failure to file a Change in Ownership Statement within alty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the chip of the real property or manufactured home, whichever is greater, or the homeowners' exemption or twenty thousand dollars (\$20,000) to file was not willful. This penalty will be added to the assessment subject to the same penalties for nonpayment.			
Α.	TR	ANSFER INFORMATION (Check the appropriate boxes	to indicate t	the method by which you acquired an interest in the property.)			
1.		Purchase (complete Sections B and C on the reverse side).  Land Sales Contract. A contract for the purchase of property		3. Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement,  Yes  No etc.?			
		in which the seller retains legal title to it after the buyer takes possession.		4. Was this transaction only a correction of the name(s) of persons or entities holding title?			
3.		Inheritance. Transfer by will or intestate succession.  Date of death  Relationship to deceased		5. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?			
4.		Trade or exchange. The above described property has be traded or exchanged for other real property or tangible per	een 16.	6. Was this transaction the termination of a joint tenancy interest?			
5.		property.  Merger or stock acquisition.	17.	7. Was this transfer between family members or related businesses?			
6.		Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage		8. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?			
7.		transferred %.  Foreclosure or trustee sale.	19.	<ol> <li>Was this document recorded to create, assign, or terminate a lender's interest in this property?</li> </ol> Yes No			
8.		Gift.	20.	0. Has this property been transferred to a trust?			
9.		Life estate.	21.	1. If the trust is irrevocable, is the transferor or the transferor's spouse or registered domestic			
10.		Reconveyance (pay-off).		partner the sole present beneficiary?			

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

22. Does this property revert to the transferor in

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

12 years or less? (Clifford Trust)

agreement.

☐ Yes ☐ No



EF-502-G-R06-0516-27000196

11. Creation or assignment of a lease:

12. Termination of a lease:

B. ₁	PROPERTY INFORMATION (		• •	•						
	Seller's name and address:			Parcel number:						
			Effective transfer date:							
	•	-		cument: Number: Date:						
	Name, address and phone number of person with purchasing firm who is familiar with the transaction and would be available to answer quest relative to the transaction:									
6.	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 ir	nterest:	Other working interest owners & percentages:						
8.	Number of wells: Producing		_ Injection	All idle						
9.	Productive acres in the parcel:			Total acres in the parcel:						
10.	Production rates at acquisition	: Oil	b/d Gas _	mcf/c	l Water	b/d				
11.	Price received for oil and gas a	at acquisition: Oil		\$/b Gas		\$/mcf				
12.	Oil gravity:	API Gas	:	btu/mcf Average producir	ng depth:	ft				
13.	Proved reserves: Develo	oped: Oil		bbl Gas		mcf				
	Undevelo	oped: Oil		bbl Gas —		mcf				
14.	Were appraisals, evaluations,	cash flow projection	s or other analyses mad	e to assist in establishing a pure	chase price?	No				
C.	<ul> <li>a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as log agreements.</li> <li>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.</li> <li>c. The allocation to your company books of the total acquisition price, by specific items.</li> </ul>									
О.	PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION  Torme: Total purchase price:			Cash to seller:						
				nount(s):						
		` '		` '	interest rate(s)					
	Source(s) of financing (bank, seller, etc.):									
D. REMARKS (Please include below any additional information about the sale or transfer which should be called to the						issessor.)				
			CERTIFICA	TION						
Part Cor	tnership includ	ding any accompanyi		ne laws of the State of California the ts, is true, correct and complete the rand/or partner.						
NAM	E OF ASSESSEE OR AUTHORIZED AGE	NT (typed or printed)		TI	TLE					
SIGN	NATURE OF ASSESSEE OR AUTHORIZE	D AGENT		DA	ATE					
NAM	E OF ENTITY (typed or printed)			FE	EDERAL EMPLOYER ID NUMBER					
PRE	PARER'S NAME AND ADDRESS (typed or	r printed)	Ti	TITLE						
DAY	TIME TELEPHONE NUMBER	E-MAIL ADDRESS								

