EF-502-G-R06-0516-31000049-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:

Matthew R. Maynard **Placer County Assessor**

2980 Richardson Drive Auburn, CA 95603-2640 Phone: (530) 889-4300

Email: assessor@placer.ca.gov Website: www.placer.ca.gov/assessor

BUYER/TRANSFEREE				RECORDING DATA					
				Date	Recorded	:			
MAILING ADDRESS				Doc	ument Num	ber:			
SELLED!	TDANGEEDOD			Asse	essor's Ider	ntification Nur	mber:		
SELLER/TRANSFEROR						MB	PG	PCL	
MAILING ADDRESS					Numbers				
	.			Buver	()				
FIELD		LEASE		Seller	()				
IMPORTANT NOTICE			_			Twp:	Rr	ng:	
assess Statem that which the est 90 day taxes a but not if the p	ted by the county assessor, to then the change in ownership hate is probated, shall be filed a s from the date of a written required by the country is not eligible for the hate of the country is not eligible for the hate of the country is not eligible for the hate of the country is not eligible for the hate of the country is not eligible for the hate of the country is not eligible for the hate of the country is not eligible for the hate of the country is not eligible for th	uiring an interest in real property file a Change in Ownership State recording or, if the transfer is not as occurred by reason of death the time the inventory and appruest by the Assessor results in a value reflecting the change in owers (\$5,000) if the property is eligible omeowners' exemption if that faiter delinquent property taxes, and	ement t recor the st raisal i penal nersh ble for lure to	with the County rded, within 90 c tatement shall b is filed. The fail Ity of either: (1) c ip of the real pro r the homeowne o file was not wi	Recorder of lays of the le filed with ure to file a cone hundre perty or mars' exemption.	or Assessor. date of the cl in 150 days a Change in O d dollars (\$1 anufactured h on or twenty benalty will b	The Char hange in or after the da ownership 00); or (2) nome, which thousand he added to	nge in Owwnership ate of dea Statemen 10 percent chever is dollars (\$	mership, except ath or, if at within at of the greater, \$20,000)
		eck the appropriate boxes to indic						property	<u>.)</u>
1.	Purchase (complete Sections	B and C on the reverse side).	13.	Was this transfe	r/addition so	olely between	spouses		
2. [Land Sales Contract A contra	tract for the purchase of property		or registered do	mestic partn	ners, divorce s	settlement,	Yes	∐ No
∟	in which the seller retains legal title to it after the buyer takes			etc.?					
, _	possession.	ssession.		Was this transa- name(s) of person	•			Yes	□ No
3. L	Inheritance. Transfer by will or intestate succession. Date of death		15.	•	nold title to this property as a joint eller or transferor also a joint ten				
				is the seller or tr			nt?	Yes	∐ No
4.	Trade or exchange. The above traded or exchanged for other r			Was this transactenancy interest		mination of a j	oint	☐ Yes	□ No
	property.	i	17.	Was this transfe	r between fa	amily member	rs or		
5.	Merger or stock acquisition.			related businesses?				☐ Yes	☐ No
6.	Partial interest transfer. Was property transferred? If yes, inc	•	18.	Was this document a deed of document?				☐ Yes	□ No
_	transferred %.		19.	Was this docum			•		
7.	Foreclosure or trustee sale.			or terminate a le	nder's inter	est in this prop	perty?	☐ Yes	∐ No
8.	Gift.		20.	Has this property				☐ Yes	☐ No
9.	Life estate.		21.	If the trust is irre				☐ Yes	□ No
10.	Reconveyance (pay-off).			partner the sole	•		•	103	140
11.	Creation or assignment of a l	ease: (date)	22.	Does this proper	•		in	☐ Yes	□ No
12.	Termination of a lease:	. ,		If you answere	d no to 21	or 22 attach	a copy of	the trust	
		(date)		agreement.	. 110 tO 21 (o. LL, allacii	a copy of t	แนงเ	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



В.	PROPERTY INFORMATION (Complete each ite	• •	•							
	Seller's name and address:									
				Parcel number:						
	Date sales agreement or letter of intent signed: Effective transfer date:									
	Closing date: Date: 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 number of any consu	ultants 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 ow	ners & percentages:						
8.	Number of wells: Producing	Injection	All idle	Other						
	Productive acres in the parcel:									
10.	Production rates at acquisition: Oil	b/d Gas _	mcf	d Waterb/d						
11.	Price received for oil and gas at acquisition: Oil	1	\$/b Gas	\$/mcf						
	Oil gravity:API Ga									
13.	Proved reserves: Developed: Oil		bbl Gas	mcf						
	Undeveloped: Oil		bbl Gas	mcf						
14.	Were appraisals, evaluations, cash flow projection	ons or other analyses mad	e to assist in establishing a pu	rchase price?						
C.	 a. The sales agreement or contract including all agreements. b. A complete listing of all assets acquired and I wells and related equipment, separately. c. The allocation to your company books of the PURCHASE PRICE OR TRANSFER AMOUNT 	liabilities assumed in the action of the act	cquisition, if not included in ite							
	Terms: Total purchase price:		Cash to seller:							
	Production and/or conventional loan(s):									
	Source(s) of financing (bank, seller, etc.):			. ,						
Purchase price allocated to: Fixed plant & equipment: Moveable equipment										
D. REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Ass										
		CERTIFICA	ATION							
Pari	tnership including any accompan		nts, is true, correct and complete	that the foregoing and all information hereon, to the best of my knowledge and belief. This						
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	Г	TITLE							
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT	С	DATE							
NAM	E OF ENTITY (typed or printed)	F	FEDERAL EMPLOYER ID NUMBER							
PRE	PARER'S NAME AND ADDRESS (typed or printed)		1	TITLE						
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS									

