EF-502-G-R06-0516-03000423-1 BOE-502-G (P1) REV. 6 (05-16)

## **CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY**

**Assessor of Amador County** 810 Court Street Jackson, CA 95642

James B Rooney

PH: (209) 223-6351 FAX: (209) 223-6721

File this statement by:

BUYER/TRANSFEREE				RECORDING DATA		
WAILING ADDRESS				Date Recorded:		
VALENTO ADDITEGO				Document Number:		
SELLER/TRANSFEROR				Assessor's Identification Number:  MB PG PCL		
				MB PG	PCL	
ИAIL	ING A	DDRESS		Phone Numbers:		
FIELD		LEASE		Buyer: ( ) Seller: ( )		
IMPORTANT NOTICE				Sec: Twp: Rr	ng:	
Statethat the 90 ctaxethat but f th	eme whe esta lays es ap not e pr	ed by the county assessor, to file a Change in Ownership State out must be filed at the time of recording or, if the transfer is not ere the change in ownership has occurred by reason of death the is probated, shall be filed at the time the inventory and appear from the date of a written request by the Assessor results in a splicable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligit operty is not eligible for the homeowners' exemption if that far shall be collected like any other delinquent property taxes, ar	ot recont the sale appearance of the sale	orded, within 90 days of the date of the change in or tatement shall be filed within 150 days after the da is filed. The failure to file a Change in Ownership alty of either: (1) one hundred dollars (\$100); or (2) hip of the real property or manufactured home, which is the homeowners' exemption or twenty thousand of file was not willful. This penalty will be added to	wnership, except ate of death or, if Statement within 10 percent of the chever is greater, dollars (\$20,000)	
		ANSFER INFORMATION (Check the appropriate boxes to indi			property.)	
1.		Purchase (complete Sections B and C on the reverse side).	13.	. Was this transfer/addition solely between spouses		
2.		Land Sales Contract. A contract for the purchase of property		or registered domestic partners, divorce settlement, etc.?	☐ Yes ☐ No	
		in which the seller retains legal title to it after the buyer takes possession.	14.	. Was this transaction only a correction of the name(s) of persons or entities holding title?	☐ Yes ☐ No	
3.		Inheritance. Transfer by will or intestate succession.	15	. If you hold title to this property as a joint tenant,		
		Date of death Relationship to deceased		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	16.	Was this transaction the termination of a joint tenancy interest?	☐ Yes ☐ No	
		property.	17.	. Was this transfer between family members or		
5.	П	Merger or stock acquisition.		related businesses?	☐ Yes ☐ No	
6.		Partial interest transfer. Was less than 100 percent of the	18.	Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar		
		property transferred? If <b>yes</b> , indicate the percentage transferred %.		document?	☐ Yes ☐ No	
7.		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 <b>yes</b> , is the trust: Revocable Irrevocable	☐ Yes ☐ No	
9. 10.		Life estate.  Reconveyance (pay-off).	21.	If the trust is irrevocable, is the transferor or the transferor's spouse or registered domestic	☐ Yes ☐ No	
10.	ш	reconveyance (pay-on).		partner the sole present beneficiary?		
11.		Creation or assignment of a lease:	22.	Does this property revert to the transferor in 12 years or less? (Clifford Trust)	☐ Yes ☐ No	
12.		Termination of a lease:		If you answered no to 21 or 22, attach a copy of tagreement.	he trust	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



В.	PROPERTY INFORMATION (Complete each ite	• •	•				
	Seller's name and address:						
	Field name:						
	Date sales agreement or letter of intent signed: Effective transfer date:						
	4. 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 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 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			
			btu/mcf Average producing depth: ft				
13.	Proved reserves: Developed: Oil		bbl Gas	mcf			
	Undeveloped: Oil		bbl Gas	mcf			
14.	Were appraisals, evaluations, cash flow projections or other analyses made to assist in establishing a purchase price?   Yes  No						
C.	<ul> <li>15. Please enclose a copy of the following:</li> <li>a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as lo 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> <li>C. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION</li> </ul>						
	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 Assessor.)						
		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. <b>This</b>			
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	Г	ITLE				
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT	С	DATE				
NAM	E OF ENTITY (typed or printed)		F	EDERAL EMPLOYER ID NUMBER			
PRE	PARER'S NAME AND ADDRESS (typed or printed)		1	TITLE			
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS						

