EF-502-G-R06-0516-03000260-1 BOE-502-G (P1) REV. 6 (05-16)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

STORE COUNTY

James B Rooney Assessor of Amador County 810 Court Street

Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721

File this statement by:

					DECORE ::-:		
BUYER/TRANSFEREE MAILING ADDRESS			RECORDING DATA Date Recorded: Document Number:				
SELLER/TRANSFEROR			MB PG PCL				
MAILING ADDRESS		_	Phone	Number	S:		
			Ruver:	()		
FIELD	LEASE		Seller:	())		
IMPORTANT NOTICE		_			_ Twp: R		
The law requires any transferee accassessed by the county assessor, to Statement must be filed at the time of that where the change in ownership the estate is probated, shall be filed 90 days from the date of a written retaxes applicable to the new base year but not to exceed five thousand doll if the property is not eligible for the roll and shall be collected like any o	o file a Change in Ownership State of recording or, if the transfer is no o has occurred by reason of death at the time the inventory and apprequest by the Assessor results in a revalue reflecting the change in ow lars (\$5,000) if the property is eligil homeowners' exemption if that fai	ement of trecord the straisal in penal or mershiple for illure to	with the County I ded, within 90 da atement shall be s filed. The failur ty of either: (1) or p of the real prop the homeowners of file was not will	Recorder ys of the filed with re to file ne hunder erty or ne s' exemp ful. This	r or Assessor. The Cha e date of the change in o thin 150 days after the o a Change in Ownership red dollars (\$100); or (2) nanufactured home, whi tion or twenty thousand penalty will be added t	nge in Ownership date of dea Statemer 10 perce chever is dollars (vnership o, except ath or, if nt within nt of the greater, \$20,000)
A. TRANSFER INFORMATION (C			•			e property	/.)
1. Purchase (complete Section)	s B and C on the reverse side).	13.	Was this transfer/	addition	solely between spouses		
	contract for the purchase of property		or registered dom etc.?	estic par	tners, divorce settlement,	☐ Yes	☐ No
in which the seller retains leg	al title to it after the buyer takes	4.4					
possession.		14.	name(s) of person	,	a correction of the ties holding title?	☐ Yes	☐ No
3. Inheritance. Transfer by will	or intestate succession.	15	. , ,		erty as a joint tenant,		
Date of death Relationship to deceased		10.	-		lso a joint tenant?	☐ Yes	☐ No
4. Trade or exchange. The abo	ove described property has been	16.	Was this transact tenancy interest?	ion the te	rmination of a joint	☐ Yes	☐ No
property.	. Tour property or tarriginal personal	17.	Was this transfer	between	family members or		
5. Merger or stock acquisition	1.		related businesse	s?		Yes	☐ No
6. Partial interest transfer. Wa property transferred? If yes, i	s less than 100 percent of the	18.			ed to substitute a trustee tgage, or other similar	☐ Yes	□ No
transferred %.		19.	Was this docume	nt record	ed to create, assign,		
7. D Foreclosure or trustee sale					erest in this property?	☐ Yes	☐ No
8. Gift.		20.			nsferred to a trust? evocable	☐ Yes	□ No
9. Life estate.		21.	If the trust is irrev	ocable, is	s the transferor or the		
10. Reconveyance (pay-off).			transferor's spous partner the sole p	_		☐ Yes	☐ No
11. Creation or assignment of a	a lease:	22.	Does this propert 12 years or less?	•		☐ Yes	☐ No
12. Termination of a lease:	Termination of a lease:			answered no to 21 or 22, attach a copy of the trust nent.			

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



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В.	PROPERTY INFORMATION (Complete each item as it appl	ŕ							
1.									
	Field name: Parcel number:								
3.	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 question 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:								
8.	Number of wells: Producing Injectic	on All idle	Other						
9.	Productive acres in the parcel:	Total acres in the	parcel:						
10.	Production rates at acquisition: Oil	b/d Gas	mcf/d Water	b/d					
11.	Price received for oil and gas at acquisition: Oil	\$/b G	as	\$/mcf					
12.	Oil gravity:API Gas:	btu/mcf Average	btu/mcf Average producing depth:						
13.	Proved reserves: Developed: Oil	bbl Ga	IS	mcf					
	Undeveloped: Oil	bbl Ga	IS	mcf					
14.	Were appraisals, evaluations, cash flow projections or other	Were appraisals, evaluations, cash flow projections or other analyses made to assist in establishing a purchase price? Ves No							
15.	 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 loar 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 								
	wells and related equipment, separately.								
C.	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:		r:						
	Production and/or conventional loan(s):								
	Source(s) of financing (bank, seller, etc.):	` '	•	,-					
	Purchase price allocated to: Fixed plant & equipment: Moveable equipment								
D.		MARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)							
		CERTIFICATION							
	OWNERSHIP TYPE	perjury under the laws of the State of C	California that the foregoing and all in	formation hereon					
Pari Cor		nts or documents, is true, correct and							
NAM	ME OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE						
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE						
NAM	ME OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUMBER						
PRE	PARER'S NAME AND ADDRESS (typed or printed)		TITLE						
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS								

