EF-502-G-R05-1111-07000755-1 BOE-502-G (P1) REV. 5 (11-11)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Gus Kramer County Assessor

2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

(Please complete the reverse side.)

DI IVED/T	RANSFEREE		RECORDING DATA		
BUTER/I	KANSPEREE		Date Recorded:		
MAILING ADDRESS			Document Number:		
			Assessor's Identification Number:		
SELLER/	FRANSFEROR		MB PG	PCL	
MAILING	ADDRESS		Phone Numbers:		
			Puvor: ()		
FIELD	LEASE		Buyer: () Seller: ()		
		_	Sec: Twp: Rn		
IMPORTANT NOTICE			Зес тwp кп	y	
assess Statem that wh the est 90 days taxes a but not if the p	w requires any transferee acquiring an interest in real propert ed by the county assessor, to file a Change in Ownership State ent must be filed at the time of recording or, if the transfer is no here the change in ownership has occurred by reason of death ate is probated, shall be filed at the time the inventory and appress from the date of a written request by the Assessor results in a pplicable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligil roperty is not eligible for the homeowners' exemption if that fails shall be collected like any other delinquent property taxes, an	ement t reco the s raisal pena nersh ble fo ilure t	with the County Recorder or Assessor. The Chan- orded, within 90 days of the date of the change in ow- tatement shall be filed within 150 days after the da- is filed. The failure to file a Change in Ownership S alty of either: (1) one hundred dollars (\$100); or (2) of hip of the real property or manufactured home, whice the thomeowners' exemption or twenty thousand of the was not willful. This penalty will be added to	ge in Ownership vnership, except ite of death or, if Statement within 10 percent of the hever is greater, dollars (\$20,000)	
	RANSFER INFORMATION (Check the appropriate boxes to indi			property.)	
1.	Purchase (complete Sections B and C on the reverse side).	13	. Was this transfer solely between husband and wife,		
2.	Land Sales Contract. A contract for the purchase of property		addition of a spouse, divorce settlement, etc.?	☐ Yes ☐ No	
2	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 to the property?	☐ Yes ☐ No	
3.	Inheritance. Transfer by will or intestate succession. Date of death	15	. If you hold title to this property as a joint tenant,	☐ Yes ☐ No	
	Relationship to deceased		is the seller or transferor also a joint tenant?	□ fes □ 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.	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 transferred %.	18	. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar 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 yes , is the trust: Revocable Irrevocable	☐ Yes ☐ No	
9.	Life estate.	21	. If the trust is irrevocable, is the transferor or the transferor's spouse the sole present beneficiary?	☐ Yes ☐ No	
10.	Reconveyance (pay-off).	22	. Does this property revert to the transferor in 12 years or less? (Clifford Trust)	☐ Yes ☐ No	
11. ∟	Creation or assignment of a lease:		If you answered no to 21 or 22, attach a copy of to		
12.	Termination of a lease:		agreement.	าธ แนวเ	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)



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В.	PROPERTY INFORMATION (Complete each ite	• •	•					
	Seller's name and address:							
	Field name:							
	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 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.	 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 loan 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. The allocation to your company books of the total acquisition price, by specific items. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION 							
	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.								
		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	ITLE					
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT				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							

