EF-502-G-R06-0516-17000450-1 BOE-502-G (P1) REV. 6 (05-16)

File this statement by:

## **CHANGE IN OWNERSHIP STATEMENT**

**OIL AND GAS PROPERTY** 



**Richard Ford County Assessor-Recorder** Lake County Courthouse

255 North Forbes Street Lakeport, CA 95453

Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293

Fax: 707-263-3703

BUYER/TI	RANSFEREE		_				RECOR	RDING DATA		
				Ī	Date F	Recorded	:			
MAILING ADDRESS					Docun	nent Num	nber:			
SELLER/TRANSFEROR					Asses	sor's Ide	ntification	Number:		
SELLER/I	RANSFEROR						MB	PG	PCL	_
MAILING	ADDRESS		_	F	Phone N	lumbers	:			
				Ruver.	( )					
FIELD	LEASE		_		Seller:	( )				
IMDC	DRTANT NOTICE		=		Sec:		_ Twp:	R	ing:	
assessing Statement that who the esta 90 days taxes a but not if the properties of t	v requires any transferee acquiring ed by the county assessor, to file a cent must be filed at the time of recordere the change in ownership has ocate is probated, shall be filed at the test from the date of a written request be pplicable to the new base year value to exceed five thousand dollars (\$5 roperty is not eligible for the homeo I shall be collected like any other de	Change in Ownership State ding or, if the transfer is not curred by reason of death time the inventory and approy the Assessor results in a reflecting the change in ow, 000) if the property is eligible wners' exemption if that fai	ment treco the st aisal i pena nersh ole for lure to	with the C rded, withi tatement s is filed. Th Ity of eithe ip of the re r the home o file was r	ounty R in 90 day hall be in he failure er: (1) on he al prope owners not willfi	ecorder  ys of the filed with the to file a the hundre erty or ma the exemption.	or Assess date of the in 150 day Change i ed dollars anufacture ion or twe penalty wi	or. The Cha e change in o ys after the o n Ownership (\$100); or (2) ed home, whi nty thousand ill be added t	nge in Ov ownership date of de o Statemen o 10 perce chever is d dollars (	vnership o, except ath or, if nt within nt of the greater, \$20,000)
	RANSFER INFORMATION (Check th								e property	y.)
1.	Purchase (complete Sections B and	C on the reverse side).	13.	Was this t	ransfer/a	ddition s	olely betwe	een spouses		
2.	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession.  Inheritance. Transfer by will or intestate succession.  Date of death			or register etc.?	ed dome	estic partr	ners, divord	ce settlement,	∐ Yes	i ∐ No
			14.	Was this to name(s) o		•	correction es holding		☐ Yes	□ No
3. 🗆			15.	If you hold			rty as a joi so a joint te		□ voo	. □ No
	Relationship to deceased			is the selle	ei Oi tiai	Sicioi ais	oo a joint te	mant:	□ 163	L INO
4.	<b>Trade or exchange.</b> The above described or exchanged for other real pr			Was this t tenancy in		on the ter	mination of	f a joint	☐ Yes	□ No
	property.		17.	Was this t	ransfer b	etween f	amily mem	bers or	_	_
5.	Merger or stock acquisition.	tock acquisition.		related bu	sinesses	?				□ No
6.	Partial interest transfer. Was less the property transferred? If yes, indicate		18.		eed of tru		d to substi gage, or oth	tute a trustee ner similar	☐ Yes	. □ No
7. 🗌	transferred %.  Foreclosure or trustee sale.		19.	Was this o			d to create est in this	_	☐ Yes	. □ No
8.	Gift.		20.	Has this p				a trust?	☐ Yes	□ No
9.	Life estate.		21.	If the trust					☐ Yes	. □ No
10.	Reconveyance (pay-off).					spouse or registered domestic sole present beneficiary?			∟ ies	INO
11.	Creation or assignment of a lease:	(date)	22.	Does this				eror in	☐ Yes	. □ No
12	Termination of a lease:	,		•			ŕ	ch a conv of	the truet	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

(date)

agreement.



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:	_								
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.	<ul> <li>a. The sales agreement or contract including all agreements.</li> <li>b. A complete listing of all assets acquired and I wells and related equipment, separately.</li> <li>c. The allocation to your company books of the PURCHASE PRICE OR TRANSFER AMOUNT</li> </ul>	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):			Interest rate(s):						
	Source(s) of financing (bank, seller, etc.):			. ,						
	Purchase price allocated to: Fixed plant & equi		Moveable equi	pment						
D. REMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of										
		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	FEDERAL EMPLOYER ID NUMBER							
PRE	PARER'S NAME AND ADDRESS (typed or printed)		1	TITLE						
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS									

