

CHANGE IN OWNERSHIP STATEMENT
OIL AND GAS PROPERTY

File this statement by:



Tammie Guenthart
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Monday-Friday:8am-5pm

BUYER/TRANSFeree
MAILING ADDRESS
SELLER/TRANSFEROR
MAILING ADDRESS
FIELD LEASE

Table with 3 columns: MB, PG, PCL. Row 1: Assessor's Identification Number.

Phone Numbers:
Buyer: ( )
Seller: ( )
Sec: Twp: Rng:

IMPORTANT NOTICE

The law requires any transferee acquiring an interest in real property or manufactured home subject to local property taxation, and that is assessed by the county assessor, to file a Change in Ownership Statement with the County Recorder or Assessor.

A. TRANSFER INFORMATION (Check the appropriate boxes to indicate the method by which you acquired an interest in the property.)

- 1. Purchase (complete Sections B and C on the reverse side).
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.
3. Inheritance. Transfer by will or intestate succession.
4. Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.
5. Merger or stock acquisition.
6. Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage transferred %
7. Foreclosure or trustee sale.
8. Gift.
9. Life estate.
10. Reconveyance (pay-off).
11. Creation or assignment of a lease: (date)
12. Termination of a lease: (date)
13. Was this transfer/addition solely between spouses or registered domestic partners, divorce settlement, etc.?
14. Was this transaction only a correction of the name(s) of persons or entities holding title?
15. If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?
16. Was this transaction the termination of a joint tenancy interest?
17. Was this transfer between family members or related businesses?
18. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?
19. Was this document recorded to create, assign, or terminate a lender's interest in this property?
20. Has this property been transferred to a trust? If yes, is the trust: Revocable Irrevocable
21. If the trust is irrevocable, is the transferor or the transferor's spouse or registered domestic partner the sole present beneficiary?
22. Does this property revert to the transferor in 12 years or less? (Clifford Trust)

If you answered no to 21 or 22, attach a copy of the trust agreement.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



**B. PROPERTY INFORMATION** (Complete each item as it applies to this transaction.)

1. Seller's name and address: \_\_\_\_\_
2. Field name: \_\_\_\_\_ Lease name: \_\_\_\_\_ Parcel number: \_\_\_\_\_
3. Date sales agreement or letter of intent signed: \_\_\_\_\_ Effective transfer date: \_\_\_\_\_
4. Closing date: \_\_\_\_\_ Recording document: Number: \_\_\_\_\_ 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 owners & percentages: \_\_\_\_\_  
\_\_\_\_\_
8. Number of wells: Producing \_\_\_\_\_ Injection \_\_\_\_\_ 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 Gas \_\_\_\_\_ \$/mcf
12. Oil gravity: \_\_\_\_\_ API Gas: \_\_\_\_\_ 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
  - a. If **yes**, please enclose copies of those appraisals, evaluations, cash flow projections or analyses. Please identify the analysis or appraisal most relied upon in establishing the purchase price.
  - b. If **no**, please explain in Section D how the purchase price was determined.
15. 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.

**C. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION**

Terms: Total purchase price: \_\_\_\_\_ Cash to seller: \_\_\_\_\_  
 Production and/or conventional loan(s): \_\_\_\_\_ Amount(s): \_\_\_\_\_ Interest rate(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.)

\_\_\_\_\_  
 \_\_\_\_\_

**CERTIFICATION**

OWNERSHIP TYPE Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other _____ <input type="checkbox"/>	<i>I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information herein, including any accompanying statements or materials, is true, correct, and complete to the best of my knowledge and belief. This declaration is binding on each and every co-owner and/or partner.</i>
NAME OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)	TITLE
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT 	DATE
NAME OF ENTITY (typed or printed)	FEDERAL EMPLOYER ID NUMBER
PREPARER'S NAME AND ADDRESS (typed or printed)	TITLE
DAYTIME TELEPHONE NUMBER (     )	E-MAIL ADDRESS

