EF-502-G-R05-1111-27000789-1 BOE-502-G (P1) REV. 5 (11-11)

## CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



## **Xochitl Marina Camacho Monterey County Assessor**

P. O. Box 570

Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435

assessor@co.monterey.ca.us

RI IVI	=R/TP	ANSFEREE		_		RECOR	DING DATA	
BUYER/TRANSFEREE					Data 5	Recorded:		
MAIL	ING A	DDRESS				recorded: nent Number:		
						sor's Identification N		
SELL	ER/TF	RANSFEROR			7,0000	MB	PG	PCL
MAII	ING A	DDRESS			Phone N	lumbers:		
WID (I)		DENCOO			Da (	)		
FIELI	D	LEAS	E		Buyer: 1	)		
				_				
IM	ΡO	RTANT NOTICE			Sec:	Twp:	Rn	g:
State that the 90 ctaxe but if the	teme t whe esta days es ap not to e pro	d by the county assessor, to file a not must be filed at the time of record the change in ownership has on the is probated, shall be filed at the from the date of a written request uplicable to the new base year value to exceed five thousand dollars (\$ operty is not eligible for the home shall be collected like any other dent to the new shall be collected like any other dent to the shall be collected like any other dent the shall be collected like any	ording or, if the transfer is not occurred by reason of death time the inventory and approperty by the Assessor results in a e reflecting the change in own 5,000) if the property is eligital owners' exemption if that fail	t reco the st aisal i pena nersh ole foi lure to	rded, within 90 day catement shall be f is filed. The failure ity of either: (1) on ip of the real prope the homeowners' of file was not willfu	is of the date of the iled within 150 day to file a Change in e hundred dollars ( irty or manufacture exemption or twen il. This penalty wil	change in over a after the da n Ownership \$ \$100); or (2) d home, which ty thousand I be added to	vnership, except ite of death or, if Statement within 10 percent of the hever is greater, dollars (\$20,000)
Α.	TR	ANSFER INFORMATION (Check to	the appropriate boxes to indic	cate ti	ne method by whic	h you acquired an i	interest in the	property.)
1.		Purchase (complete Sections B and C on the reverse side).		13.		olely between husba se, divorce settlemen		☐ Yes ☐ No
2.	Ш	<b>Land Sales Contract.</b> A contract fo in which the seller retains legal title possession.				on only a correction on only a correction of some of the corrections of the correction of the correcti		☐ Yes ☐ No
3.		Inheritance. Transfer by will or interplate of death		15.		his property as a join		
		Relationship to deceased			is the seller or tran	sferor also a joint ter	nant?	☐ Yes ☐ No
4.		<b>Trade or exchange.</b> The above destraded or exchanged for other real p		16.	Was this transaction tenancy interest?	on the termination of	a joint	☐ Yes ☐ No
		property.		17.	Was this transfer b	etween family memb	pers or	
5.		Merger or stock acquisition.			related businesses	?		☐ Yes ☐ No
6.		Partial interest transfer. Was less property transferred? If yes, indicate		18.		t recorded to substitu ist, mortgage, or oth		☐ Yes ☐ No
7.		transferred %.  Foreclosure or trustee sale.		19.		t recorded to create, er's interest in this p	0 /	☐ Yes ☐ No
8.		Gift.		20.		een transferred to a		☐ Yes ☐ No
9.		Life estate.		21.	If the trust is irrevo	cable, is the transfer the sole present be	or or the	☐ Yes ☐ No
10.		Reconveyance (pay-off).	onveyance (pay-off).			revert to the transfer	-	☐ Yes ☐ No
11.	Ш	Creation or assignment of a lease	(date)		·	,	sh a conv of t	
12.		Termination of a lease:	(date)		agreement.	10 to 21 or 22, attac	лі а сору от п	ก่อ แนงเ
14.		ioniniation of a lease.	(date)		_	se complete the re	everse side.)	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



EF-502-G-R05-1111-27000785

В.	PROPERTY INFORMATION (Complete each item as it	applies to this transaction	1.)							
1.	Seller's name and address:									
2.	Field name: Lease n	ame:	Parcel number	r:						
3.	Date sales agreement or letter of intent signed:		Effective transfer date:							
4.	Closing date: Re	ecording document: Num	nber:	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 us	sed in connection with th	e 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 Inje	ection	All idle	Other						
9.	Productive acres in the parcel:	То	tal acres in the parcel:							
10.	Production rates at acquisition: Oil	b/d Gas	mcf/d Wat	erb/d						
11.	Price received for oil and gas at acquisition: Oil		\$/b Gas	\$/mcf						
	Oil gravity:API Gas:									
	Proved reserves: Developed: Oil									
	Undeveloped: Oil		bbl Gas	mcf						
14.	Were appraisals, evaluations, cash flow projections or other									
15.	<ul> <li>b. If no, please explain in Section D how the purchase price was determined.</li> <li>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 loan agreements.</li> </ul>									
	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:		Cash to seller:							
	Production and/or conventional loan(s):	Amount(s	3):	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 Asses										
		CERTIFICATION								
Par	tnership including any accompanying state poration declaration is binding on each	ements or documents, is tr	rue, correct and complete to the be	foregoing and all information hereon, est of my knowledge and belief. <b>This</b>						
NAM	TE OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE							
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT	DATE	DATE							
NAM	ME OF ENTITY (typed or printed)	FEDERAL	FEDERAL EMPLOYER ID NUMBER							
PRE	PARER'S NAME AND ADDRESS (typed or printed)	TITLE								
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS		1							

