EF-502-G-R06-0516-27000103-1 BOE-502-G (P1) REV. 6 (05-16)

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

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

BUYI	ER/TR	ANSFEREE			RECORDING DATA	4
				Date Record	ed:	
MAIL	ING A	DDRESS		Document N	umber:	
2511	- D/T	OWINEED OD		Assessor's Id	dentification Number:	
SELL	.ER/IF	RANSFEROR			MB PG	PCL
MAIL	ING A	DDRESS		Phone Number	ers:	
				D ()	
FIELI	D	LEASE		Buyer: ()	
IM	PΩ	RTANT NOTICE		Sec:	Twp: I	Rng:
State that the state of the sta	teme t whe estar days es ap not t	In the county assessor, to file a Change in Ownership State out must be filed at the time of recording or, if the transfer is no ere the change in ownership has occurred by reason of death te is probated, shall be filed at the time the inventory and apperfrom the date of a written request by the Assessor results in a policable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligit operty is not eligible for the homeowners' exemption if that fair shall be collected like any other delinquent property taxes, an	of recorded the stated raisal is filed penalty of the for the ilure to filed	I, within 90 days of the ment shall be filed we ded. The failure to file feither: (1) one hund the real property or homeowners' exemes was not willful. This	ne date of the change in ithin 150 days after the e a Change in Ownershidred dollars (\$100); or (2 manufactured home, who tion or twenty thousants penalty will be added	ownership, except date of death or, if p Statement within 2) 10 percent of the nichever is greater, ad dollars (\$20,000)
		ANSFER INFORMATION (Check the appropriate boxes to indi			<u> </u>	he property.)
1.		Purchase (complete Sections B and C on the reverse side).	13. Wa	s this transfer/additior	solely between spouses	
2		Land Cales Contract A contract for the nurshape of property			artners, divorce settlemen	t, 🗌 Yes 📙 No
۷.	Ш	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes	etc	.?		
		possession.		s this transaction only	a correction of the	
_		Inheritance. Transfer by will or intestate succession.		ne(s) of persons or en	tities holding title?	☐ Yes ☐ No
3.	Ш			ou hold title to this pro	perty as a joint tenant.	
		Date of death	-	ne seller or transferor		☐ Yes ☐ No
		Relationship to deceased			•	
4.		Trade or exchange. The above described property has been		s this transaction the t ancy interest?	termination of a joint	☐ Yes ☐ No
		traded or exchanged for other real property or tangible personal	len	ancy interest?		□ res □ ino
		property.		s this transfer between	n family members or	
5.		Merger or stock acquisition.	rela	ited businesses?		☐ Yes ☐ No
			18. Wa	s this document recor	ded to substitute a trustee	е
6.		Partial interest transfer. Was less than 100 percent of the	unc	ler a deed of trust, mo	rtgage, or other similar	
		property transferred? If yes , indicate the percentage	doc	cument?		☐ Yes ☐ No
		transferred %.	19. Wa	s this document recor	ded to create, assign,	
7.		Foreclosure or trustee sale.			terest in this property?	☐ Yes ☐ No
						☐ Yes ☐ No
8.		Gift.		s this property been tr	Revocable Irrevocabl	
9.	Ш	Life estate.			is the transferor or the	☐ Yes ☐ No
10.		Reconveyance (pay-off).		nsferor's spouse or rec		∟ Yes ∟ No
10.		reconveyance (pay-on).	par	tner the sole present t	benelicially?	
11.		Creation or assignment of a lease:	22. Do	es this property revert	to the transferor in	
	_	(date)		years or less? (Clifford		☐ Yes ☐ No

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

agreement.



EF-502-G-R06-0516-2700010:

12. Termination of a lease:

B. ₁	PROPERTY INFORMATION (C	•	• •	,						
	Seller's name and address:			Parcel number:						
			Effective transfer date:							
	•	•		locument: Number: Date:						
	Name, address and phone number of person with purchasing firm who is familiar with the transaction and would be available to answer que relative to the transaction:									
6.	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 inte	rest:	Other working interest owners & percentages:						
8.	Number of wells: Producing		Injection	All idle						
9.	Productive acres in the parcel: _			_ Total acres in the parcel:						
10.	Production rates at acquisition:	Oil	b/d Gas	mcf/c	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: Develop	oed: Oil		bbl Gas		mcf				
	Undevelop	oed: Oil ———		bbl Gas —		mcf				
14.	Were appraisals, evaluations, ca	ash flow projections o	or other analyses made	e to assist in establishing a purc	chase price? 🗌 Yes 🔲 I	No				
C.	 a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as 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, included wells and related equipment, separately. c. The allocation to your company books of the total acquisition price, by specific items. 									
С.	PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION Torms: Total purchase price:			Cash to seller:						
				Amount(s): Interes						
		` '		. ,	Interest rate(s)					
	Source(s) of financing (bank, seller, etc.): Moveable equipment									
D.	REMARKS (Please include belo			ssessor.)						
	_		CERTIFICA	TION						
_	OWNERSHIP TYPE	/ (or declare) under ne		e laws of the State of California th	nat the foregoing and all inform	nation hereon				
Part Cor	tnership includii	ng any accompanying		ts, is true, correct and complete t						
NAM	E OF ASSESSEE OR AUTHORIZED AGEN	Γ (typed or printed)		Tr	ΓLE					
SIGN	NATURE OF ASSESSEE OR AUTHORIZED	AGENT		DA	TE					
NAM	E OF ENTITY (typed or printed)			FE	DERAL EMPLOYER ID NUMBER					
PRE	PARER'S NAME AND ADDRESS (typed or p	rinted)	TI	ΓLE						
DAY	TIME TELEPHONE NUMBER E-	MAIL ADDRESS		l .						

