EF-502-G-R05-1111-33000674-1 BOE-502-G (P1) REV. 5 (11-11)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

Assessor-County Clerk-Recorder County of Riverside PO Box 751

Larry W. Ward

Riverside, CA 92502-0751 Phone: (951) 955-6200 https://www.asrclkrec.com/

File this statement by:

		DECORDING DATA		
BUYER/T	RANSFEREE	RECORDING DATA		
MAILING	ADDRESS	Date Recorded: Document Number:		
		Assessor's Identification Number:		
SELLER/TRANSFEROR		MB PG PCL		
MAILING	ADDRESS	Phone Numbers:		
W ULIVO	10011200	Puner ()		
FIELD	LEASE	Buyer: () Seller: ()		
		Sec: Twp: Rng:		
IMPO	ORTANT NOTICE	Sec Twp Krig		
Statem that wh the est 90 days taxes a but not if the p	ent must be filed at the time of recording or, if the transfer is not nere the change in ownership has occurred by reason of death ate is probated, shall be filed at the time the inventory and apps from the date of a written request by the Assessor results in applicable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligit	rement with the County Recorder or Assessor. The Change in Ownership of recorded, within 90 days of the date of the change in ownership, except in the statement shall be filed within 150 days after the date of death or, if oraisal is filed. The failure to file a Change in Ownership Statement within a penalty of either: (1) one hundred dollars (\$100); or (2) 10 percent of the wnership of the real property or manufactured home, whichever is greater, ible for the homeowners' exemption or twenty thousand dollars (\$20,000) ailure to file was not willful. This penalty will be added to the assessment and be subject to the same penalties for nonpayment.		
		dicate the method by which you acquired an interest in the 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 in which the seller retains legal title to it after the buyer takes possession.	addition of a spouse, divorce settlement, etc.?		
		14. Was this transaction only a correction of the name(s) of persons or entities holding title to the property?		
3.	Inheritance. Transfer by will or intestate succession.	15. If you hold title to this property as a joint tenant,		
	Date of death	is the seller or transferor also a joint tenant?		
	Relationship to deceased	16. Was this transaction the termination of a joint		
4.	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal property.	tenancy interest? Yes Yes No		
		17. Was this transfer between family members or		
- L	1	related businesses?		
5. L	Merger or stock acquisition.	18. Was this document recorded to substitute a trustee		
6.	Partial interest transfer. Was less than 100 percent of the	under a deed of trust, mortgage, or other similar		
	property transferred? If yes , indicate the percentage transferred %.	document?		
	transferred%.	19. Was this document recorded to create, assign,		
7.	Foreclosure or trustee sale.	or terminate a lender's interest in this property?		
8.	Gift.	20. Has this property been transferred to a trust?		
9.	Life estate.	21. If the trust is irrevocable, is the transferor or the		
10.	Reconveyance (pay-off).	transferor's spouse the sole present beneficiary?		
10.	in the section of the	22. Does this property revert to the transferor in		
11.	Creation or assignment of a lease:	12 years or less? (Clifford Trust) ☐ Yes ☐ No		
10 [(date)	If you answered no to 21 or 22, attach a copy of the trust agreement.		
12. ∟	Termination of a lease:	(Please complete the reverse side.)		

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							
3.			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 intere	-	,	t owners & percentages:				
8.	Number of wells: Producing In	njection	All idle	Other				
9.	Productive acres in the parcel:		Total acres in the parc	el:				
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 pro	ducing 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?							
15.	 b. If no, please explain in Section D how the purchase price was determined. 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.	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):	Ar	mount(s):	Interest rate	e(s):			
	Source(s) of financing (bank, seller, etc.):							
	Purchase price allocated to: Fixed plant & equipment: Moveable equipment							
D.	REMARKS (Please include below any additional inform	be called to the attention of	the Assessor.)					
		CERTIFICA	ATION					
	OWNERSHIP TYPE			wais that the favoration and all	information borner			
Part	prietorship	atements or docume	nts, is true, correct and comp					
NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)			TITLE				
SIGN	NATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE					
NAM	IE OF ENTITY (typed or printed)		FEDERAL EMPLOYER ID NUM	BER				
PRE	PARER'S NAME AND ADDRESS (typed or printed)		TITLE					
DAY"	TIME TELEPHONE NUMBER E-MAIL ADDRESS							

