EF-502-G-R05-1111-45000711-1 BOE-502-G (P1) REV. 5 (11-11)

CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

1450 Court St., Suite 208A Redding, CA 96001-1667

LESLIE MORGAN

Tel: (530) 225-3600

ASSESSOR-RECORDER

Intra_County toll free: 1(800)479-8009

File this statement by:

BI IVED?	/TP	ANSEERE	_	RECORDING DATA		
BUYER/TRANSFEREE				Date Recorded:		
MAILING ADDRESS				Document Number:		
				Assessor's Identification Number:		
SELLER/TRANSFEROR				MB PG	PCL	
MAII ING	2 Δ	DDRESS		Phone Numbers:		
IVII (ILII VC	٠,,			B		
FIELD		LEASE		Buyer: () Seller: ()		
			_	Sec: Twp: Rr		
IMP	0	RTANT NOTICE		Sec: Twp: Rr	ıg:	
Staten that w the es 90 day taxes a but no if the p	ne ta ys ap ot t	d by the county assessor, to file a Change in Ownership State nt must be filed at the time of recording or, if the transfer is not are the change in ownership has occurred by reason of death the is probated, shall be filed at the time the inventory and appriant from the date of a written request by the Assessor results in a plicable to the new base year value reflecting the change in ow to exceed five thousand dollars (\$5,000) if the property is eligible perty is not eligible for the homeowners' exemption if that fails shall be collected like any other delinquent property taxes, and	the saisal pena pena pena pena pena pena pena pena	orded, within 90 days of the date of the change in ore statement shall be filed within 150 days after the date is filed. The failure to file a Change in Ownership alty of either: (1) one hundred dollars (\$100); or (2) hip of the real property or manufactured home, which or the homeowners' exemption or twenty thousand to file was not willful. This penalty will be added to	wnership, except ate of death or, if Statement within 10 percent of the chever is greater, dollars (\$20,000)	
A. T	R	ANSFER INFORMATION (Check the appropriate boxes to indic	cate i	the method by which you acquired an interest in the	property.)	
	_	Purchase (complete Sections B and C on the reverse side).	13	. Was this transfer solely between husband and wife, addition of a spouse, divorce settlement, etc.?	☐ Yes ☐ No	
2. L		Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes possession.	14	. Was this transaction only a correction of the name(s) of persons or entities holding title to the property?	☐ Yes ☐ No	
3.		Inheritance. Transfer by will or intestate succession. Date of death Relationship to deceased	15	If you hold title to this property as a joint tenant, is the seller or transferor also a joint tenant?	☐ Yes ☐ No	
4.		Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal	16	. Was this transaction the termination of a joint tenancy interest?	☐ Yes ☐ No	
5.		property. Merger or stock acquisition.	17	. Was this transfer between family members or related businesses?	☐ Yes ☐ No	
6.		Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage	18	. Was this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?	☐ Yes ☐ No	
7.		transferred %. Foreclosure or trustee sale.	19	. Was this document recorded to create, assign, or terminate a lender's interest in this property?	☐ Yes ☐ No	
8.		Gift.	20	. Has this property been transferred to a trust? If yes, is the trust: Revocable Irrevocable	☐ Yes ☐ No	
9. [Life estate.	21	. If the trust is irrevocable, is the transferor or the transferor's spouse the sole present beneficiary?	☐ Yes ☐ No	
10.		Reconveyance (pay-off).	22	Does this property revert to the transferor in 12 years or less? (Clifford Trust)	☐ Yes ☐ No	
11. ∟ 12. □	_	Creation or assignment of a lease:	If you answered no to 21 or 22, attach a copy of the trust agreement.			
14. ∟	_	(date)		(Please complete the reverse side.)	

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION



В.	PROPERTY INFORMATION (Complete each it		,					
	Seller's name and address:							
	Field name: Lease name:							
	Date sales agreement or letter of intent signed: 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	interest:	Other working interest ov	/ners & percentages:				
8.	Number of wells: Producing	Injection	All idle	Other				
	Productive acres in the parcel:							
	Production rates at acquisition: Oil							
	Price received for oil and gas at acquisition: Oi							
	Oil gravity:API Ga							
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							
C.	 5. 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 loa 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. PURCHASE PRICE OR TRANSFER AMOUNT INFORMATION 							
	Terms: Total purchase price:		Cash to seller:					
	Production and/or conventional loan(s):	Ar	mount(s):	Interest rate(s):				
	Source(s) of financing (bank, seller, etc.):							
	Purchase price allocated to: Fixed plant & equi	ipment:	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	including any accompan		nts, is true, correct and complete	that the foregoing and all information hereon, to the best of my knowledge and belief. This				
NAM	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)			TITLE				
SIGN	IATURE OF ASSESSEE OR AUTHORIZED AGENT	I	DATE					
	E OF ENTITY (typed or printed)		EDERAL EMPLOYER ID NUMBER					
PRE	PARER'S NAME AND ADDRESS (typed or printed)			TITLE				
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS							

