

**FILED**

2020 AUG 20 AM 10:35

CLERK  
US BANKRUPTCY COURT  
DISTRICT OF DELAWARE

Fill in this information to identify the case:

Debtor 1 CHAPARRAL ENERGY

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware

Case number 20-11947

Official Form 410

**Proof of Claim**

12/15

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim**

1. Who is the current creditor? CDW Direct, LLC  
Name of the current creditor (the person or entity to be paid for this claim)  
Other names the creditor used with the debtor \_\_\_\_\_

2. Has this claim been acquired from someone else?  
 No  
 Yes. From whom? \_\_\_\_\_

3. Where should notices and payments to the creditor be sent?  
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
<u>CDW / Attn: Ronelle Erickson</u>	Name _____
Name <u>200 N. Milwaukee Ave</u>	Number Street _____
Number Street <u>Vernon Hills IL 60061</u>	City State ZIP Code _____
City State ZIP Code _____	City State ZIP Code _____
Contact phone <u>847-419-6253</u>	Contact phone _____
Contact email <u>Roneeri@cdw.com</u>	Contact email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one):  
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4. Does this claim amend one already filed?  
 No  
 Yes. Claim number on court claims registry (if known) \_\_\_\_\_ Filed on \_\_\_\_\_ MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?  
 No  
 Yes. Who made the earlier filing? \_\_\_\_\_

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**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?  No  Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

Customer #12627486 Please reference on all correspondence mailed to CDW

7. How much is the claim? \$ 2580.71 Does this amount include interest or other charges?  No  Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.

Goods Sold

9. Is all or part of the claim secured?  No  Yes. The claim is secured by a lien on property. Nature of property:  Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  Motor vehicle  Other. Describe: \_\_\_\_\_

Basis for perfection: \_\_\_\_\_ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ \_\_\_\_\_  
Amount of the claim that is secured: \$ \_\_\_\_\_

Amount of the claim that is unsecured: \$ \_\_\_\_\_ (The sum of the secured and unsecured amounts should match the amount in line 7.)

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Amount necessary to cure any default as of the date of the petition: \$ \_\_\_\_\_  
Annual Interest Rate (when case was filed) \_\_\_\_\_%  
 Fixed  Variable

10. Is this claim based on a lease?  No  Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff?  No  Yes. Identify the property: \_\_\_\_\_

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?  No  Yes. Check all that apply:

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.	\$ <u>2580.71</u>

\* Amounts are subject to adjustment on 4/01/16 and every 3 years after that for cases begun on or after the date of adjustment.

**Part 3: Sign Below**

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 08/17/2020  
MM / DD / YYYY

Ronelle Erickson  
Signature

Print the name of the person who is completing and signing this claim:

Name Ronelle Erickson  
First name Middle name Last name

Title Recovery Supervisor

Company CDW, LLC  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 200 N Milwaukee Ave

Number Street IL 60061

City State ZIP Code Vernon Hills, IL 60061

Contact phone 847-419-6253 Email Roneeri@cdw.com

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**AUG 25 2020**

**KURTZMAN CARSON CONSULTANTS**

**1262748 CHAPAR ENERGY**

Invoice:	Date:	Original Amount	Open Amount	PO:
ZQK6819	8/05/2020	\$ 2,805.00	\$ 2,580.71	ND060320-2
			\$ 2,580.71	

REMIT PAYMENT TO: \_\_\_\_\_

**INVOICE**



ACH INFORMATION:  
THE NORTHERN TRUST  
50 SOUTH LASALLE STREET  
CHICAGO, IL 60675

E-mail Remittance To: achremittance@cdw.com  
ROUTING NO.: 071000152  
ACCOUNT NAME: CDW DIRECT  
ACCOUNT NO.: 47910



**CDW Direct**  
PO Box 75723  
Chicago, IL 60675-5723

RETURN SERVICE REQUESTED

INVOICE NUMBER	INVOICE DATE	CUSTOMER NUMBER
ZQK6819	08/05/20	12627486
SUBTOTAL	SHIPPING	SALES TAX
\$2,805.00	\$0.00	\$0.00
DUE DATE		AMOUNT DUE
09/04/20		\$2,805.00

CHAPARRAL ENERGY  
AP  
701 CEDAR LAKE BLVD  
OKLAHOMA CITY OK 73114-7806  
USA

CDW Direct  
P.O. Box 75723  
Chicago, IL 60675-5723

**PLEASE RETURN THIS PORTION WITH YOUR PAYMENT**

INVOICE DATE	INVOICE NUMBER	PAYMENT TERMS				DUE DATE
08/05/20	ZQK6819	Net 30 Days				09/04/20
ORDER DATE	SHIP VIA	PURCHASE ORDER NUMBER				CUSTOMER NUMBER
06/03/20	DROP SHIP-GROUND	ND060320-2				12627486
ITEM NUMBER	DESCRIPTION	QTY ORD	QTY SHIP	QTY B/O	UNIT PRICE	TOTAL
3020131	RUCKUS WATCHDOG PS RNW F/ZD3050 Manufacturer Part Number: 821-3050-1000	1	1	0	1,683.00	1,683.00
3134377	RUCKUS WATCHDOG ZD3000 CONTROL SUP Manufacturer Part Number: 823-3000-1RDY Electronic distribution - NO MEDIA	1	1	0	561.00	561.00
3623725	RUCKUS WATCHDOG PS RNW F/ZD3050 Manufacturer Part Number: 821-3025-1L00 Electronic distribution - NO MEDIA	1	1	0	561.00	561.00

**GO GREEN!**

CDW is happy to announce that paperless billing is now available! If you would like to start receiving your invoices as an emailed PDF, please email CDW at [paperlessbilling@cdw.com](mailto:paperlessbilling@cdw.com). Please include your Customer number or an Invoice number in your email for faster processing.

**REDUCE PROCESSING COSTS AND ELIMINATE THE HASSLE OF PAPER CHECKS!**

Begin transmitting your payments electronically via ACH using CDW's bank and remittance information located at the top of the attached payment coupon. Email [credit@cdw.com](mailto:credit@cdw.com) with any questions.

ACCOUNT MANAGER	SHIPPING ADDRESS:	SUBTOTAL	\$2,805.00
JUSTIN JAMES 312-705-6912 <a href="mailto:justjam@cdw.com">justjam@cdw.com</a>	CHAPARRAL ENERGY ATTN: NICOLE DOBBINS 701 CEDAR LAKE BLVD OKLAHOMA CITY OK 73114-7806	SHIPPING	\$0.00
<b>SALES ORDER NUMBER</b>		SALES TAX	\$0.00
1C20MBX		<b>AMOUNT DUE</b>	<b>\$2,805.00</b>



ISO 9001 and ISO 14001 Certified  
CDW DIRECT FEIN 36-4530079

**HAVE QUESTIONS ABOUT YOUR ACCOUNT?**  
PLEASE EMAIL US AT [credit@cdw.com](mailto:credit@cdw.com)  
VISIT US ON THE INTERNET AT [www.cdw.com](http://www.cdw.com)