

## Fill in this information to identify the case:

Debtor 1 Chaparral Energy, L.L.C.Debtor 2  
(Spouse, if filing) \_\_\_\_\_

United States Bankruptcy Court for the: District of Delaware

Case number 20-11953

FILED

2020 SEP 15 AM 9:37

U.S. BANK  
DISTRICT OF DELAWARE  
CLERK

## Official Form 410

## Proof of Claim

04/16

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?	<u>Louisiana Department of Environmental Quality</u> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<u>LDEQ, Jaime Elsey</u> Name <u>P.O. Box 4302</u> Number Street <u>Baton Rouge LA 70821</u> City State ZIP Code Contact phone <u>225-219-3985</u> Contact email <u>jaime.elsey@la.gov</u>	Name Number Street City State ZIP Code Contact phone Contact email

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Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	



20119532009150000000000001

**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: \_\_\_\_\_

7. How much is the claim? \$ 1,567.45 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.  
Annual environmental fees

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 one:

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

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

**Amount entitled to priority**

\$ \_\_\_\_\_

☐ Up to \$2,850\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$12,850\*) 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).

\$ \_\_\_\_\_

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ \_\_\_\_\_

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/19 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.

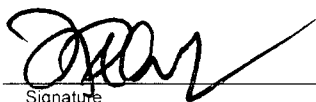
I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

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

MM / DD / YYYY

  
Signature

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

Name Theresa Delafosse  
First name Middle name Last name

Title Accountant Administrator

Company Louisiana Department of Environmental Quality  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address P.O. Box 4302  
Number Street

Baton Rouge LA 70821  
City State ZIP Code

Contact phone 225-219-3985 Email theresa.delafosse@la.gov

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**STATE OF LOUISIANA**  
Department of Environmental Quality

LA DEQ Tax ID: 72-0999270

Customer Service: 225-219-5337

Site Information: AI 116028

Chaparral Energy LLC - Corporate Office Only  
701 Cedar Lake Blvd  
Oklahoma City, OK 73114

**Billing Party:** 137  
CHAPARRAL ENERGY LLC-C290  
701 CEDAR LAKE BLVD  
OKLAHOMA CITY, OK 73114-7806

Invoice Number: 2020-NTA067742	Invoice Amount:	\$459.00
Fiscal Year: 2020	Invoice Adj	\$ .00
Invoice Date: 03/30/2020	Payment Adj	\$ .00
	Payments	\$ .00
<b>Due Date: 04/30/2020</b>	<b>Balance</b>	<b>\$459.00</b>

Please see Reverse for Payment Options.

**Assessments:** LAC 33:XV.25

RADIATION PROTECTION - NORM = \$459.00

RADIATION PROTECTION - NORM LATE FEE = \$45.90

2020 SEP 15 AM 9:36

Please Return Portion Below with Payment

Billing Contact

CHAPARRAL ENERGY LLC-C290  
701 CEDAR LAKE BLVD  
OKLAHOMA CITY, OK 73114-7806

Site Information: AI 116028

Chaparral Energy LLC - Corporate Office Only  
701 Cedar Lake Blvd  
Oklahoma City, OK 73114

**Amount Due:**

<b>After</b>	05/15/2020	\$481.95
<b>After</b>	05/30/2020	\$504.90
<b>After</b>	06/29/2020	\$527.85

☐ Please indicate any billing address or billing contact corrections on the reverse side of this ticket.

☐ Please send me the appropriate paperwork to update my company name and/or ownership to the indicated address on the reverse side of this ticket.

Invoice Number: 2020-NTA06774;

Fiscal Year: 2020

☐ I am paying for multiple invoices

Make Checks Payable to:  
Mail Payments to:

**Louisiana Department of Environmental Quality  
Financial Services Division  
PO Box 4311  
Baton Rouge, LA 70821-4311**

**Amount Paid:**

NTA	000000000067742	2020	137	00116028	0000050490
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