Case 20-33505 Documen	t 146 Filed in 1	XSR on 10/19/21 Page 1 of 3 Docket #0146 Date Filed: 10/19/2021
UNITED STA	TES BANKRU	PTCY COURT
Southerr	DISTRICT OF	Texas
TEXA	AS HOUSTON DI	VISION
In re: HI CRUSH PERMIAN SAND, LLC	\$ \$	Case No. <u>20-33505</u> Lead Case No. 20-33495
Debtor(s)	§ §	☑ Jointly Administered
Post-confirmation Report		Chapter 11
Quarter Ending Date: 06/30/2021		Petition Date: <u>07/13/2020</u>
Plan Confirmed Date: 09/23/2020		Plan Effective Date: <u>10/09/2020</u>
This Post-confirmation Report relates to: Reorgani 		
○ Other Au	uthorized Party or En	tity:Name of Authorized Party or Entity

/s/ Philip M. Guffy Signature of Responsible Party

10/19/2021

Date

Philip M. Guffy Printed Name of Responsible Party

600 Travis Street, Suite 4200, Houston, Texas 77002 Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.



Debtor's Name HI CRUSH PERMIAN SAND, LLC

Case No. 20-33505

Part 1: Summary of Post-confirmation Transfers

	Current Quarter	Total Since Effective Date
a. Total cash disbursements	\$0	\$0
b. Non-cash securities transferred	\$0	\$0
c. Other non-cash property transferred	\$0	\$0
d. Total transferred (a+b+c)	\$0	\$0

		onfirmation Professional Fees a	nu Expenses	Approved	Approved	Paid Current	Paid
				Current Quarter	11	Quarter	Cumulative
a.		ssional fees & expenses (bankruptcy) red by or on behalf of the debtor	Aggregate Total				
	Itemiz	ed Breakdown by Firm					
		Firm Name	Role				
	i						
	ii						

					Approved	Approved	Paid Current	Paid
					Current Quarter	Cumulative	Quarter	Cumulative
b.	Professional fees & expenses (nonbankruptcy) incurred by or on behalf of the debtor Aggregate Total							
	Itemized Breakdown by Firm							
		Firm Name]	Role				
	i							
	ii							
c.	All professional fees and expenses (debtor & committees)							

Part 3: Recoveries of the Holders of Claims and Interests under Confirmed Plan

	Total Anticipated Payments Under Plan	Paid Current Quarter	Paid Cumulative	Allowed Claims	% Paid of Allowed Claims
a. Administrative claims	\$0	\$0	\$0	\$0	0%
b. Secured claims	\$0	\$0	\$0	\$0	0%
c. Priority claims	\$0	\$0	\$0	\$0	0%
d. General unsecured claims	\$0	\$0	\$0	\$0	0%
e. Equity interests	\$0	\$0	\$0		

Part 4: Questionnaire

a. Is this a final report?	Yes 🔿 No 💿
If yes, give date Final Decree was entered:	
If no, give date when the application for Final Decree is anticipated: $03/2$	31/2022
b. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930?	Yes 💿 No 🔿

Debtor's Name HI CRUSH PERMIAN SAND, LLC

Case No. 20-33505

Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information and provision of this information is mandatory. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6) and to otherwise evaluate whether a reorganized chapter 11 debtor is performing as anticipated under a confirmed plan. Disclosure of this information may be to a bankruptcy trustee when the information is needed to perform the trustee's duties, or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." *See* 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/ rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case, or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Post-confirmation Report and its attachments, if any, are true and correct and that I have been authorized to sign this report.

/s/ Tim Lambrecht

Signature of Responsible Party

Chief Financial Officer

Title

Tim Lambrecht
Printed Name of Responsible Party
10/19/2021
Date