Fill in this information to identify the case:	
Debtor 1 Chaparral Energy, Inc	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: District of Delaware	•
Case number <u>20-11947</u>	

FILED

2020 NOV 23 AM 11: 16

CLERK US BANKRUPTCY COURT DISTRICT OF DELAWARE

## Official Form 410

## **Proof of Claim**

04/19

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 Cla	aim			
. Who is the current creditor?	Flash Funding, LLC  Name of the current creditor (the person or entity to be paid for this clai  Other names the creditor used with the debtor			
Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?			
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?  The Fuentes Firm, P.C.	Where should payments to the creditor be sent? (If different)  David Miller		
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 5507 Louetta Rd., Suite A	Name PO Box 21622 Number Street		
	Spring TX 77379 City State ZIP Code	Houston         TX         77226           City         State         ZIP Code		
RECEIVED NOV 2 4 2020	Contact phone 832-559-5522  Contact email cristina@fuentesfirm.com	Contact phone 713-694-5920  Contact email david@flash-funding.com		
KURTZMAN CARSON CONSULTA	NTS niform claim identifier for electronic payments in chapter 13 (if you u	use one): 		
4. Does this claim amend one already filed?	<ul> <li>✓ No</li> <li>☐ Yes. Claim number on court claims registry (if known)</li> </ul>	Filed on MM / DD / YYYY		
5. Do you know if anyone else has filed a proof of claim for this claim?	Yes Who made the earlier filing?			

De :	w hove one number	□ No			
you u	ise to identify the	☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:			
How	much is the claim?	\$			
		✓ No  ☐ Yes. Attach statement Itemizing interest, fees, expenses, or other			
		charges required by Bankruptcy Rule 3001(c)(2)(A).			
Wha	t is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.			
clair		ttach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  mit disclosing information that is entitled to privacy, such as health care information.			
		Claim for unpaid freight charges.			
ls al	l or part of the claim	☑ 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, llen, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)			
		Value of property:			
		Value of property:  S  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			
	RECEIVED				
		Amount necessary to cure any default as of the date of the petition: \$			
	NOV 2 L 2020				
KURTZMAN CARSON CONSULTANTS		ANTS Annual Interest Rate (when case was filed)%			
		☐ Fixed ☐ Variable			
10. Is this claim based on a		<b>⊠</b> No			
	ase?	Yes. Amount necessary to cure any default as of the date of the petition.			
11 le	this claim subject to a	<b>☑</b> No			
ri	ght of setoff?	☐ Yes. Identify the property:			

the creditor. the creditor's attorney or authorize the trustee, or the debtor, or their a guarantor, surety, endorser, or or and that an authorized signature or if the claim, the creditor gave the de	rchase, lease, or rental of proper 11 U.S.C. § 507(a)(7).  to to \$13,650*) earned within 180 otor's business ends, whichever mental units. 11 U.S.C. § 507(a)(fit plan. 11 U.S.C. § 507(a)(5).  C. § 507(a)() that applies.  1/22 and every 3 years after that for a continuous decident agent.  authorized agent. Bankruptcy Rule on this Proof of Claim serves as a continuous decident.	days before the is earlier.  \$
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ect.	of of Claim and have a reasonab	ole belief that the information is true
under penalty of perjury that the fo	oregoing is true and correct.	
d on date 11 10 7013		
ature		
e name of the person who is con	npleting and signing this clain	n:
David Miller First name	Middle name	Last name
Flash Funding, LLC		orant is a servicer
Identify the corporate service	cer as the company if the authorized	ayent is a servicer.
PO Box 21622		
Number Street		
Houston	T	77226
	, Sta	te ZIP Code
phone 713-694-5920		ail david@flash-funding.com
•	David Miller First name  Flash Funding, LLC Identify the corporate servi	David Miller  First name  Middle name  Flash Funding, LLC  Identify the corporate servicer as the company if the authorized  PO Box 21622  Number Street  Houston To

Contact phone