

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS

PROOF OF CLAIM


POC ID: 1522

Indicate Debtor against which you assert a claim by checking the appropriate box. (Check only one Debtor per claim form.)

Cano Petroleum, Inc. (Case No. 12-31549) Tri-Flow, Inc. (Case No. 12-31553)
 Cano Petro of New Mexico (Case No. 12-31550) W.O. Energy of Nevada, Inc (Case No. 12-31554)
 Ladder Companies, Inc. (Case No. 12-31551) W.O. Operating Company, Ltd. (Case No. 12-31556)
 Square One Energy, Inc. (Case No. 12-31552) W.O. Production Company, Ltd. (Case No. 12-31557)
 WO Energy, Inc. (Case No. 12-31555)

NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property) :

Name and address where notices should be sent:
 29747776001522
GENEVA MOORE REED
9828 FM 2272
CLAUDE, TX 79019-4404

RECEIVED
APR 12 2012
BMC GROUP

806 944 5217

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.
THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number () email:

Name and address where payment should be sent (if different from above):
Edwin A. Reed
9428 FM 2272
Claude, Tex 79019-4404 806 944 5217

Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Check this box to indicate that this claim amends a previously filed claim.
Court Claim Number (if known):
Filed on:

Payment Telephone Number () email:

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ _____
If all or part of your claim is secured, complete item 4.
If all or part of your claim is entitled to priority, complete item 5.
 Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.


2. BASIS FOR CLAIM: (See instruction #2)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 1522
3a. Debtor may have scheduled account as: (See instruction #3a)
3b. Uniform Claim Identifier (optional): (See instruction #3b)

4. SECURED CLAIM: (See instruction #4)
Check the appropriate box if your claim is secured by a lien on property or a right of set off, attach required redacted documents, and provide the requested information.
Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$ _____
Nature of property or right of setoff: Describe:
 Real Estate Motor Vehicle Other Royalty
Basis for Perfection: _____
Value of Property: \$ _____ Amount of Secured Claim: \$ _____
Annual Interest Rate: _____ % Fixed or Variable Amount Unsecured: \$ _____
(when case was filed)

5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.
Amount entitled to priority: \$ _____
You MUST specify the priority of the claim:
 Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
 Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use -11 U.S.C. § 507(a)(7). Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).
 Wages, salaries, or commissions (up to \$11,725*), earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4). Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).

* Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

CANO PETROLEUM

00027

6. CREDITS: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

7. DOCUMENTS: Attached are redacted copies of documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and definition of "redacted").

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

DATE-STAMPED COPY To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (**FAXES NOT ACCEPTED**) so that it is actually received on or before 5:00 pm, prevailing Central Time on May 7, 2012 for All Entities and Persons including Governmental Units.

BY MAIL TO:
BMC Group, Inc.
Attn: Cano Petroleum, Inc. Claims Processing
PO Box 3020
Chanhasen, MN 55317-3020

BY MESSENGER OR OVERNIGHT DELIVERY TO:
BMC Group, Inc.
Attn: Cano Petroleum, Inc. Claims Processing
18675 Lake Drive East
Chanhasen, MN 55317

***You are encouraged to E-File your proof of claim directly by logging onto <http://www.bmcgroup.com/Cano/ClaimFiling>**

8. SIGNATURE: (See instruction #8)

Check the appropriate box.

- I am the creditor. I am the creditor's authorized agent.
(Attach copy of power of attorney, if any.) I am the trustee, or the debtor,
or their authorized agent. I am a guarantor, surety, indorser, or other codebtor.
(See Bankruptcy Rule 3004.) (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Eglwair A. Reed
Title: _____
Company: _____

Address and telephone number (if different from notice address above):

Eglwair A. Reed 9 April 2012
(Signature) (Date)

Telephone number: _____ email: _____

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

Letters Testamentary



No. 1886

State of Texas

In The County Court

County Of ARMSTRONG

ARMSTRONG County, Texas

I, the Undersigned Clerk of the County Court of ARMSTRONG County, Texas, do

Hereby certify that on the 17TH day of DECEMBER, A.D. 20 09,

EDWIN A. REED was duly granted by said Court Letters Testamentary

of the Estate of GENEVA M. REED, Deceased, and that _____ he

qualified as Independent Execut OR _____ of said Estate on the 17TH day of DECEMBER,

A.D. 20 09, as the law requires, and that said appointment is still in full force and effect.

Given under my hand and seal of office at CLAUDE,

Texas, the 17TH day of DECEMBER A.D. 20 09.



County Clerk

ARMSTRONG County, Texas

By: _____

Deputy

(Seal)

No. 1886

Estate of

GENEVA M. REED

, Decedent

Letters Testamentary
To

EDWIN A. REED

AS INDEPENDENT EXECUTOR

Issued the

17TH Day of DECEMBER 20 09

Conrad Salter
clerk

By _____ Deputy

County Court

ARMSTRONG

County, Texas

Ed Reed
9828 Fm. 2272
de, TX 79019-4404



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BMC GROUP

BMC Group, Inc.
Ceno Petroleum, Inc.
Box 3020
Cherhessen, MN 5517-3020

