



APR 09 2012

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS		PROOF OF CLAIM	
Name of Debtor: Cano Petroleum, Inc.		Case Number: 12-31549	
<p>YOUR CLAIM IS SCHEDULED AS:</p> <p>POC ID: s1733 Amount/Classification \$0.00 Unsecured</p>			
<p><i>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.</i></p>			
Name of Creditor (the person or other entity to whom the debtor owes money or property):			
Name and address where notices should be sent:		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>RECEIVED</p> <p>APR 16 2012</p> <p>BMC GROUP</p> </div>	
 2974777004767 GRACO OILFIELD SERVICES PO BOX 667 VERNAL, UT 84078			
Creditor Telephone Number () email:		<p>The amount(s) reflected above constitute your claim as scheduled by the Debtor. If you agree with the amounts set forth above, and have no other claim against the Debtor, you need not file this proof of claim <u>EXCEPT</u> as stated below.</p> <p>If the amount(s) shown above are listed as Contingent, Unliquidated and/or Disputed, a Proof of Claim must be filed.</p> <p>If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.</p> <p style="text-align: center;">THIS SPACE IS FOR COURT USE ONLY</p>	
Name and address where payment should be sent (if different from above):			
Payment Telephone Number () email:		<p><input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.</p> <p>Court Claim Number (if known): _____</p> <p>Filed on: _____</p>	
<p><input type="checkbox"/> 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.</p>			
<p>1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ <u>12,470.95</u></p> <p>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.</p> <p><input type="checkbox"/> 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.</p>			
<p>2. BASIS FOR CLAIM: <u>Services Performed</u> (See instruction #2)</p>			
<p>3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: <u>053</u></p>		<p>3a. Debtor may have scheduled account as: (See instruction #3a)</p>	<p>3b. Uniform Claim Identifier (optional): (See instruction #3b)</p>
<p>4. SECURED CLAIM: (See instruction #4)</p> <p>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.</p> <p>Nature of property or right of setoff: Describe:</p> <p><input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____</p> <p>Value of Property: \$ _____</p> <p>Annual Interest Rate: _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)</p> <p>Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$ _____</p> <p>Basis for Perfection: _____</p> <p>Amount of Secured Claim: \$ _____</p> <p>Amount Unsecured: \$ _____</p>			
<p>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.</p> <p>Amount entitled to priority: \$ _____</p> <p>You MUST specify the priority of the claim:</p> <p><input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).</p> <p><input type="checkbox"/> 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). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).</p> <p><input type="checkbox"/> 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). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).</p> <p style="text-align: right;">CANO PETROLEUM  00044</p>			
<p>* 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.</p>			
<p>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)</p>			

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
Chanhassen, MN 55317-3020

BY MESSENGER OR OVERNIGHT DELIVERY TO:
BMC Group, Inc.
Attn: Cano Petroleum, Inc. Claims Processing
18675 Lake Drive East
Chanhassen, 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: Jon Lambd
Title: President
Company: GRAID

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

[Signature] 4/10/12
(Signature) (Date)

Telephone number: 435/789-2706 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.



A DBA of Graco Fishing & Rental Tools, Inc.

GRACO OILFIELD SERVICES

PO Box 677630, DALLAS, TX 75267-7630

VOICE (435)789-2766

FAX (435)789-2973

INVOICE: 092680901

Invoice Date: Wednesday, November 28, 2007

Due Date: 12/28/2007

Cust No. C053

INVOICE TO:

CANO PETRO, INC.

801 CHERRY STREET UNIT 25

SUITE 3200

FORT WORTH, TX USA 76102

Phone: (817) 698-0900

Fax: (817) 698-0796

Ordered By: FREDDY RAY

Ship Via :
 Ship To :
 Lease/OCSG : CSAU
 AFE Number :
 Area/Block :
 Rig Number :
 Well Number : 109
 State : NEW MEXICO
 County :
 Job Type : FOAM
 Contractor :

(DELIVERY TICKET 26809)

QTY	DESCRIPTION	MINIMUM	BILL FROM THRU	ADD DAYS	ADD'L AMOUNT	TOTAL
	BILLING PERIOD IS 11/27/07 -- 11/27/07					
1	FAOMUNIT	2,250.00	11/27/2007-11/27/2007	1		2,250.00
1	OPERATOR	900.00	11/27/2007-11/27/2007	1		900.00
1	SWIVEL	1,150.00	11/27/2007-11/27/2007	1		1,150.00
1	OPERATOR	1,350.00	11/27/2007-11/27/2007	1		1,350.00
1	FOAMUNIT OPERATOR STANDBY	1,900.00	11/27/2007-11/27/2007	1		1,900.00
1	MILEAGE	270.00				270.00
1	SUBSISTENCE	220.00	11/27/2007-11/27/2007	1		220.00
1	DIESEL	300.00				300.00
1	FLOAT	100.00				100.00
1	250 BBLs FRAC TANK	70.00	11/27/2007-11/27/2007	1		70.00
1	TOP SUB 2 3/8 EUE BOX X 2 3/8 REG PIN	81.00	11/27/2007-11/27/2007	1		81.00
1	BOWEN SERIES 150 REG OVERSHOT 3 3/4 OD	460.00	11/27/2007-11/27/2007	1		460.00
1	TUBING SPEAR 2 3/8 OD PIPE	263.00	11/27/2007-11/27/2007	1		263.00
1	3 1/8 OD 18 STROKE BUMPER SUB	628.00	11/27/2007-11/27/2007	1		628.00
1	3 1/8 OD HYDRO FISHING JAR	1,935.00	11/27/2007-11/27/2007	1		1,935.00

SubTotal: 11,877.00

Taxable Total: 11,877.00

NEW MEXICO Tax: 593.85

Total Tax: 593.85

THANK YOU FOR YOUR BUSINESS... AMOUNT DUE... \$12,470.85

143614

REBILLED PER HOLMAN



FISHING AND RENTAL TOOLS INC.

REMIT TO: P. O. Box 667, VERNAL, UTAH 84078

DELIVERY TICKET

Page No. 1

N^o 66517

Charge To Holman Services LAND PUMP, INC
 Address BOX 2742 801 Cherry Street
 City State, Zip Pampa, Texas 79066 SUITE 300
 Your Order No. NA FOR WORTH, TX 76102

Delivered From Field Move
 Ordered By Freddy Ray
 Lease CSAU Well No. 109
 Rig No. NA Delivered By Graco

DESCRIPTION	Date Returned	Days Charged	MIN. RENTAL		Each Add'l Day	AMOUNT
			Days	Amount		
Foamunit		1	1	2250.00	2250.00	\$2,250.00
Oper.		1	1	900.00	900.00	\$900.00
Swivel		2	2	575.00	575.00	\$1,150.00
Oper.		2	2	675.00	675.00	\$1,350.00
Foamunit / Oper. Stand By		1	1	1900.00	1900.00	\$1,900.00
Mileage		2	2	2.25	2.25	\$270.00
Subsistence		2	2	110.00	110.00	\$220.00
Diesel (100 Gal.)		1	1	3.00	3.00	\$300.00
Float (1)		1	1	100.00	100.00	\$100.00
2 1/16" B.I.W. Stp. Rubber				220.00	220.00	Not used
250 blis Frac. Tank		2	2	35.00	35.00	\$70.00
Top Sub 2 3/8 EUE Box X 2 3/8 REG Pin		2	2	60.00	21.00	\$81.00
Bowen Series 150 Reg. Overshot 3 3/4" OD		1	1	460.00	230.00	\$460.00
Tubing Spear 2 3/8" OD Pipe or smaller		1	1	263.00	197.00	\$263.00
3 1/8" OD 18" stroke Bumper Sub		2	2	314.00	314.00	\$628.00
SUBTOTAL						
TAX						
TOTAL						

1. Rental will be charged for the entire number of days away from shop.
 2. Charge will be made for any damage or the loss of any parts.
 3. Terms: Net 30 days. A finance charge of 1 1/2% per month (18% annum) will be charged on the unpaid, past due balance. Purchaser agrees to pay reasonable attorney's fees and other cost incurred for collection.

The undersigned hereby agrees to be bound by the price book of Graco Fishing and Rental Tools, Inc.
 RECEIVED BY [Signature]

I certify that I have examined the tools and found them in good serviceable condition and accept them with the understanding that:

ABOVE TOOLS ARE FOR RENTAL PURPOSES ONLY UNLESS WE OTHERWISE SPECIFY
 Accrued rental charges cannot be applied against the purchase price of tools out on rental or lost tools.
 We do not guarantee any rental tool in any respect, and party renting same assumes all responsibility while tool is his possession.
 If the undersigned, do hereby certify that I have full authority to obtain the above listed tools and/or supplies, and to have same charged as above.



GRACO OILFIELD SERVICES

Moving Forward, Honoring the Past

P.O. Box 667

Vernal, Utah 84078

CERTIFIED MAIL™



7011 0110 0002 2838 2927



PITNEY BOWES

\$ 005.750

02 1P

0003913861 APR 11 2012

MAILED FROM ZIP CODE 84078

BMC Group, Inc.

Attn: Cano Petroleum, Inc.

Claims Processing

P.O. Box 3020

Chanassen, MN 55317-3020

RECEIVED

APR 16 2012

BMC GROUP

55317+3020

