

Cano Petroleum, et al - Electronic Proof of Claim Filing Interface

Indicate Debtor against which you assert a claim by selecting from the dropdown below.(Only one Debtor per claim form maybe selected.)



Cano Petroleum, Inc Case No. 12-31552

Debtor:

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:

Name and Address where notices should be sent:

Creditor Name

Address1

Address2

Address3

Address4

City

Country

State

Zip

Email

Phone

Extension



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Click if payment address is different than noticing address:

C/O or Attn.

Address1

Address2

Address3

City

Country

UNITED STATES

State

- SELECT A STATE -

Zip

Email

Phone

Extension

Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: Filed Date:

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

1. Amount of Claim as of Date Case Filed: \$

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not 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 of Claim: Current Royalty Owner

3. Last four digits of any number by which creditor identifies debtor: - 6989

[]

3a. Debtor may have scheduled account as:

[]

3b. Uniform Claim Identifier (optional):

[]

4. Secured Claim - Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: (Select One) Unknown

Property Value: \$ []

Annual Interest Rate: % [] Fixed or Variable

Amount of arrearage and other charges as of time case filed included in secured claim.

If any: \$ []

Basis of perfection: []

Amount of Secured Claims: \$ []

Amount Unsecured: \$ []

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

Specify the priority of the claim.

Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).

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).

Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, 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 applicable paragraph of 11 U.S.C. § 507 (a)([]).

Amount entitled to priority: \$ [Unknown]

*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.

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.



7. 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. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest.

If the documents are not available, please explain:

Attachments:

- Necessary documentation can be attached to the Proof of Claim after the information for the form is submitted.
- Attachments to the Proof of Claim are required to be PDF files.
- Attachments to the Proof of Claim are NOT to exceed 5.0 Mb in size. Multiple attachments to the Proof of Claim are permitted.

Do you wish to attach supporting documentation? Yes No

8. Signature

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. (See Bankruptcy Rule 3004.)
- I am a guarantor, surety, indorser, or other codebtor. (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.

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.

Signature:

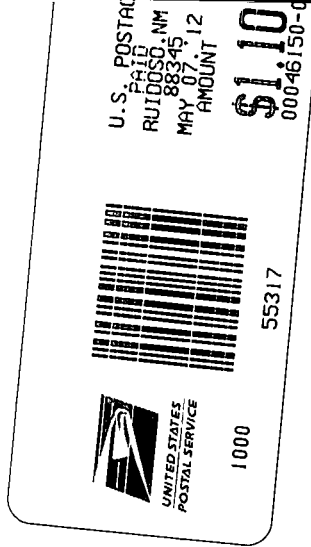
Title:

When complete, hit "Review" to preview your claim in pdf format. After reviewing the pdf, hit "Back" to make changes or "Submit" to file your claim. Your claim will not be filed until you hit "Submit."

[Review >](#)

For assistance with this Electronic Proof of Claim Filing Interface, please call the BMC Group Call Center at (888) 909-0100.

Linda and Rick Langston
318 Barcus Rd
Ruidoso, NM 88345



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Care of Chamber Claims
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