

UNITED STATES BANKRUPTCY COURT, NORTHERN DISTRICT OF TEXAS		PROOF OF CLAIM
Indicate Debtor against which you assert a claim by (Check only one Debtor per claim form.)	checking the appropriate box.	
<input checked="" type="checkbox"/> Cano Petroleum, Inc. (Case No. 12-31549) <input type="checkbox"/> Cano Petro of New Mexico (Case No. 12-31550) <input type="checkbox"/> Ladder Companies, Inc. (Case No. 12-31551) <input type="checkbox"/> Square One Energy, Inc. (Case No. 12-31552)	<input type="checkbox"/> Tri-Flow, Inc. (Case No. 12-31553) <input type="checkbox"/> W.O. Energy of Nevada, Inc (Case No. 12-31554) <input type="checkbox"/> W.O. Operating Company, Ltd. (Case No. 12-31556) <input type="checkbox"/> W.O. Production Company, Ltd. (Case No. 12-31557) <input type="checkbox"/> 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): <u>Thaddeus Potter Calinson</u>		COURT USE ONLY
Name and address where notices should be sent: Thaddeus Potter Calinson 7257 NW 4th Boulevard PMB 15 Gainesville FL 32607 Telephone number: 352-514-6802 email: tpc47@hotmail.com		
Name and address where payment should be sent (if different from above): Telephone number: email:		
<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: <i>(If known)</i> Filed on		
<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.		
1. Amount of Claim as of Date Case Filed: If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: <u>Oil and/or Gas Royalties</u> (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor:	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 the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.		
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe:		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:
Value of Property:		Basis for perfection:
Annual Interest Rate % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Amount of Secured Claim:
Amount Unsecured:		Amount entitled to priority:
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.		
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> 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).	<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).
<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"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507 (a)(8).	<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)().
<i>*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.</i>		
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 any 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 the definition of "**redacted**.")

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:

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. (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.

Print Name: Thaddeus Potter Calinson

Title:

Company:

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

/s/ Thaddeus Potter
(Signature)

5/7/2012
(Date)

Telephone number:

e-mail:

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.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, attach a complete copy of any power of attorney, and provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

SQUARE ONE ENERGY

DIVISION ORDER

To: Thaddeus Potter Calinson Date: 4/2/2010
PMB 15 7257 NW 4th Blvd
Gainesville, FL 32607 Effective Date: 4/1/2010

Property Number: 104000
Property Name: Desdemona Field Unit Interest Type: Royalty Interest
Operator: Square One Energy
County and State: Eastland, Erath, Comanche, Texas
Property Description(s):

DESDEMONA FIELD UNIT

Covering 7,273 acres, more or less, in Eastland, Erath and Comanche Counties, Texas, more particularly described in that certain Unit Agreement dated July 1, 1986, recorded in volume 1089, pages 1-72 of the Deed Records of Eastland County, Texas, Volume 51, pages 202-272 of the Oil and Gas Records of Erath County, Texas, and Volume 616, pages 43-115 of the Deed Records of Comanche County, Texas.

Owner #	Owner Name	Property Name	Prod.	Decimal Interest
	Thaddeus Potter Calinson	Desdemona Field Unit	Oil	0.00003854
			Gas	0.00003854
			Other	0.00003854

Each of the undersigned (each an "Owner") certifies its ownership of the decimal interest in production or proceeds as described above payable by Square One Energy, Inc. ("Payor").

Payor shall be notified, in writing, of any change in ownership, decimal interest, or payment address. All such changes shall be effective the first day of the month following receipt of such notice.

Payor is authorized for its own account to receive production into its possession or to deliver the same to any party designated by Payor, the production so received to be run and measured in accordance with applicable pipeline rules and regulations, including those of the governmental agency having recognized jurisdiction over or control of the production and handling of crude oil in such area.

Valuation.

- (a) Oil. The oil run hereunder shall, on the terms herein stated, become Payor property immediately upon being received into Payor's possession or the possession of Payor's designated buyer, and Payor agrees to receive the oil run hereunder and, subject to the further provisions hereof, to pay the Owners therefor according to the division of interest herein indicated, either at the posted per barrel (42 gallons) field price for crude of the same grade and gravity prevailing for the field where produced on the date of each respective run, or, if the oil is purchased by a buyer, the price to be paid shall be the same price received by Payor from such buyer, and, in the absence of a pipeline connection, all prices are subject to deduction of barging or trucking costs and the applicable transportation tax thereon. The word "oil" as used herein shall include all hydrocarbons purchased in a liquid state.
- (b) Gas. In making settlements for the interest of the Owners in the proceeds from the sale of gas, Payor is authorized to use the net proceeds received by Payor at whatever point the gas is sold, based upon the terms of an arms' length gas sales contract prudently negotiated in light of the facts and circumstances existing at the time of consummation of such contract; provided, however, that should any order of any regulatory body, state or federal, provide for a price less

than the price provided for in any gas sales contract such lesser price shall constitute the net proceeds for the purpose of making payments hereunder. Payor is authorized to charge a fair and reasonable amount for making merchantable and/or conditioning the gas to satisfy customary pipeline specifications and compressing the gas produced and sold from said property as a deduction from the gross amount received to determine the net proceeds for which settlement shall be made. The word "gas" as used herein shall include all gaseous substances, including without limitation casinghead gas.

Payment. From the Effective Date, payment is to be made monthly by Payor's check; however, if the proceeds for any one month amount to less than \$100, Payor may defer payment until the accrued proceeds total that sum; provided that in the event no payment is made during the calendar year, payment of accumulated proceeds less than \$100 shall be made in the month of February of the following year.

Indemnity. Each Owner agrees to indemnify and hold Payor harmless from all liability resulting from payments made to such Owner in accordance with the division of interest set forth herein, including but not limited to attorney fees or judgments in connection with any suit that affects such Owner's interest to which Payor is made a party.

Dispute; Withholding of Funds. If a suit is filed that affects the interest of an Owner, written notice shall be given to Payor by such Owner together with a copy of the complaint or petition filed. In the event of a claim or dispute that affects title to the division of interest set forth herein, Payor is authorized to withhold payments accruing to such interest, without interest unless otherwise required by applicable statute, until the claim or dispute is settled.

THIS AGREEMENT DOES NOT AMEND ANY LEASE OR OPERATING AGREEMENT BETWEEN ANY OWNER AND THE LESSEE OR OPERATOR OR ANY OTHER CONTRACTS FOR THE PURCHASE OF OIL OR GAS.

In addition to the terms and conditions of this Division Order, Owners and Payor may have certain statutory rights under the laws of the state in which the property is located.

Owner(s) Signature

Owner(s) Social Security Number or
Federal Tax ID Number

Owner(s) Telephone/Fax

Thaddeus Potter Calinson
127-24-7850

352-514-6802

FAILURE TO FURNISH YOUR SOCIAL SECURITY/TAX I.D. WILL RESULT IN A WITHHOLDING TAX IN ACCORDANCE WITH FEDERAL LAW, AND ANY TAX WITHHELD WILL NOT BE REFUNDABLE BY PAYOR.
