


B 10 (Official Form 10) (04/10)

UNITED STATES BANKRUPTCY COURT		PROOF OF CLAIM
Name of Debtor: <u>BENNIE MAY (M)</u>		Case Number: <u>10-33565</u>
<i>NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.</i>		
Name of Creditor (the person or other entity to whom the debtor owes money or property):		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent: <u>BENNIE MAY (M) 1927 62nd AVE OAKLAND, CA 94621</u>		Court Claim Number: _____ (If known)
Telephone number: <u>(510) 809-7597</u>		Filed on: _____
Name and address where payment should be sent (if different from above): <u>N/A</u>		<input type="checkbox"/> 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.
Telephone number: _____		<input type="checkbox"/> Check this box if you are the debtor or creditor in this case.
1. Amount of Claim as of Date Case Filed: <u>\$ 100,000</u>		<p style="text-align: center;">FILED JUL 29 2010</p> <p style="text-align: center;">TAWANA C. MARSHALL, CLERK U.S. BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS</p>
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.		
<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.		
2. Basis for Claim: _____ (See instruction #2 on reverse side.) <u>OIL & GAS LEAS</u>		<input type="checkbox"/> 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.
3. Last four digits of any number by which creditor identifies debtor: <u>6757</u>		Specify the priority of the claim.
3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.		<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).
Nature of property or right of setoff: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other		<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).
Describe: _____		<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).
Value of Property: \$ _____ Annual Interest Rate: _____ %		<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).
Amount of arrearage and other charges as of time case filed included in secured claim: _____		<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507 (a)().
If any: \$ _____ Basis for perfection: _____		Amount entitled to priority: \$ _____
Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		<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.		RECEIVED AUG 02 2010 BMC GROUP
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. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)		
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.		
If the documents are not available, please explain:		
Date: <u>7/29/10</u>	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. <u>[Signature]</u>	
		FOR COURT USE ONLY TriDimension  00192

7. I BELIEVE THAT DEBTOR

HAS AN OIL + GAS LEASE

ON LAND OWNED BY ME

(~~AS~~ → TX) I

PRESENTLY DO NOT HAVE

THE DOCUMENTS BUT WILL

FILE THEM WHEN THEY

ARE LOCATED.

Northern District of Texas Claims Register

10-33565-sgj11 TriDimension Energy, L.P.

Judge: Stacey G. Jernigan **Chapter:** 11
Office: Dallas **Last Date to file claims:** 07/28/2010
Trustee: **Last Date to file (Govt):**

<i>Creditor:</i> (13413382) History Bennie Mays III 1927 62nd Ave. Oakland, CA 94621	Claim No: 67 <i>Original Filed</i> Date: 07/29/2010 <i>Original Entered</i> Date: 07/29/2010	<i>Status:</i> Filed by: CR Entered by: Wiker, Joshua Modified:
---	---	--

Unsecured claimed: \$100000.00 Total claimed: \$100000.00
--

History:
[Details](#) [67-1](#) 07/29/2010 Claim #67 filed by Bennie Mays III, total amount claimed: \$100000 (Wiker, Joshua)

Description:

Remarks:

Claims Register Summary

Case Name: TriDimension Energy, L.P.
Case Number: 10-33565-sgj11
Chapter: 11
Date Filed: 05/21/2010
Total Number Of Claims: 1

	Total Amount Claimed	Total Amount Allowed
Unsecured	\$100000.00	
Secured		
Priority		
Unknown		
Administrative		
Total	\$100000.00	\$0.00