

2019 AUG 22 AM 10:38:31

United States Bankruptcy Court for the District of Delaware

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

- Emerge Energy Services LP (Case No. 19-11563)
- Emerge Energy Services GP LLC (Case No. 19-11564)
- Emerge Energy Services Operating LLC (Case No. 19-11565)
- Superior Silica Sands LLC (Case No. 19-11566)
- Emerge Energy Services Finance Corporation (Case No. 19-11567)

**Official Form 410
Proof of Claim**

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed.

Part 1: Identify the Claim

1. Who is the current creditor?

BILL W SHIVER

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

No

Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?

Where should notices to the creditor be sent?

BILL W SHIVER

Name

265 ASHBROOK DR

Number Street

MARTINEZ GA

City

State

30907

ZIP Code

USA

Country

Contact phone 706-840-0154

Contact email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____

Where should payments to the creditor be sent? (if different)

MERRILL LYNCH FBO BILL W SHIVER

Name

933 BROAD STREET

Number Street

ANGUSTA GA

City

State

30901

ZIP Code

USA

Country

Contact phone 706-823-4107

Contact email brett.wilson@ml.com

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4. Does this claim amend one already filed?

No

Yes. Claim number on court claims registry (if known) _____

Filed on _____
MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

No

Yes. Who made the earlier filing? _____



Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 2187

7. How much is the claim? \$ 11,060.00 Does this amount include interest or other charges? No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. INVESTMENT LOSSES

9. Is all or part of the claim secured? No Yes. The claim is secured by a lien on property. Nature of property: Real estate: If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: _____

Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ _____

Annual Interest Rate (when case was filed) _____ % Fixed Variable

10. Is this claim based on a lease? No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No Yes. Identify the property: _____

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12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No

Yes. Check all that apply:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____

Up to \$3,025* 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 \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, 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 subsection of 11 U.S.C. § 507(a)() that applies. \$ _____

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)? Please see the instructions attached hereto regarding additional required information.

No

Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ _____

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 09-10-2019
MM / DD / YYYY

William W Shiver III
Signature

Print the name of the person who is completing and signing this claim:

Name BILL W SHIVER
First name Middle name Last name

Title _____

Company _____
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 205 ASHBROOK DRIVE
Number Street

MARTINEZ GA 30907 USA
City State ZIP Code Country

Contact phone 706-840-0154 Email _____

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Laura B. Kanagy

The TAG Group
Client Associate

Merrill Lynch Wealth Management

933 Broad Street
Augusta, GA 30901
T 706 823 4127 F 706 955 4533
laura.b.kanagy@ml.com

MERRILL LYNCH
A BANK OF AMERICA COMPANY

FBO WILLIAM W SHIVER

Account Number: 714-82187

YOUR RETIREMENT ACCOUNT ASSETS

August 01, 2019 - August 30, 2019

EQUITIES (continued) Description	Symbol	Acquired	Quantity	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss) Annual Income	Estimated Annual Income
AT&T INC	T	09/28/16	100.0000	40.7957	4,079.57	35.2600	3,526.00	(553.57)	204
CURRENT YIELD 5.78%		01/26/17	100.0000	41.6761	4,167.61	35.2600	3,526.00	(641.61)	204
		05/02/17	2.0000	39.1450	78.29	35.2600	70.52	(7.77)	5
		08/02/17	1.0000	39.0000	39.00	35.2600	35.26	(3.74)	3
		08/02/17	2.0000	38.8550	77.71	35.2600	70.52	(7.19)	5
		11/02/17	1.0000	33.9000	33.90	35.2600	35.26	1.36	3
		11/02/17	2.0000	33.5950	67.19	35.2600	70.52	3.33	5
		02/02/18	2.0000	38.9550	77.91	35.2600	70.52	(7.39)	5
		05/02/18	3.0000	32.5666	97.70	35.2600	105.78	8.08	7
		08/02/18	1.0000	36.8700	36.87	35.2600	35.26	(1.61)	3
		08/02/18	3.0000	31.9433	95.83	35.2600	105.78	9.95	7
		11/02/18	3.0000	30.5766	91.73	35.2600	105.78	14.05	7
		02/04/19	1.0000	30.9000	30.90	35.2600	35.26	4.36	3
		02/04/19	3.0000	29.9866	89.96	35.2600	105.78	15.82	7
		05/02/19	1.0000	30.3400	30.34	35.2600	35.26	4.92	3
		05/02/19	3.0000	30.9000	92.70	35.2600	105.78	13.08	7
		07/31/19	0.7018	32.8156	23.03	35.2600	24.75	1.72	2
		07/31/19	3.0000	34.4300	103.29	35.2600	105.78	2.49	7
Subtotal			231.7018		9,313.53		8,169.81	(1,143.72)	487
EMERGE ENERGY SERVICES	EMESQ	02/19/15	200.0000	55.3000	11,060.00	0.0140	2.80	(11,057.20)	
ENERGY TRANSFER LP	ET	07/02/15	384.0000	27.5000	10,560.00	13.6100	5,226.24	(5,333.76)	469
CURRENT YIELD 8.96%									
GENERAL MOTORS CO COMMON SHARES	GM	09/28/16	100.0000	31.8300	3,183.00	37.0900	3,709.00	526.00	152
CURRENT YIELD 4.09%									
MERCK AND CO INC SHS	MRK	04/25/19	100.0000	76.3569	7,635.69	86.4700	8,647.00	1,011.31	220
CURRENT YIELD 2.54%		07/09/19	0.6514	84.4335	55.00	86.4700	56.33	1.33	2
Subtotal			100.6514	7,690.69	7,690.69		8,703.33	1,012.64	222

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