B10 (Official Form 10) (04/13)

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UNITED STATES BANKRUPTCY COURT Northern Distr	rict of Alabama	PROOF OF CLAIM			
Name of Debtor:	Case Number:				
Walter Minerals, Inc.	15-2763	RECEIVED			
		OCT 0 9 2015			
NOTE: Do not use this form to make a claim for an administrative expense that aris may file a request for payment of an administrative expense according		Week to come of a land to the company of the compan			
Name of Creditor (the person or other entity to whom the debtor owes money or prop Alabama Power Company		- KURTZMANCARSON CONSULTANTS			
Name and address where notices should be sent:		COURT USE ONLY			
Balch & Bingham LLP, c/o Eric T. Ray, 1901 Sixth Avenue North, S Birmingham, Alabama 35203	suite 1500	Check this box if this claim amends a previously filed claim.			
Telephone number: (205) 226-3457 email: eray@balch.com		Court Claim Number:(If known)			
		Filed on:			
Name and address where payment should be sent (if different from above):	☐ 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.				
Telephone number: email:					
1. Amount of Claim as of Date Case Filed: \$ 3	3,193.76	I			
If all or part of the claim is secured, complete item 4.	and the second s				
If all or part of the claim is secured, complete item 4.					
		and the state of t			
Check this box if the claim includes interest or other charges in addition to the prin	cipal amount of the claim. Attach a	statement that itemizes interest or charges.			
Basis for Claim: Prepetition Electric Service (See instruction #2)					
3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have scheduled account	as: 3b. Uniform Claim Identif	ier (optional):			
(See instruction #3a)	(See instruction #3b)				
4. Secured Claim (See instruction #4)	Amount of arrearage and included in secured claim,	other charges, as of the time case was filed, if any:			
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: □Real Estate □Motor Vehicle □Other Describe:	Basis for perfection:				
Value of Property: \$	Amount of Secured Claim	: \$			
	Amount Unsecured:	\$			
Annual Interest Rate% □Fixed or □Variable (when case was filed)	Amount Ousecureu:	<u></u>			
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the priority and state the amount.	f the claim falls into one of the fol	lowing categories, check the box specifying			
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). ☐ Wages, salaries, or commissions (u earned within 180 days before the case debtor's business ceased, whichever is 11 U.S.C. § 507 (a)(4).	was filed or the employee ben	efit plan –			
Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).	nental units –	agraph of			
*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with r					
6. Credits. The amount of all payments on this claim has been credited for the pu					



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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, security agreements or, in the case of a claim based on an open end or revolving consumer credit agreement, a

running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). 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. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

RECEIVED

If the documents are not available, please explain:

OCT 0 9 2015

8. Signature:	(See instruction	#8)

Check the appropriate box.

KURTZMANCARSONCONSUITANTS

☐ I am the creditor.

I am the creditor's authorized agent.

☐ 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: Eric T. Ray

Title: Attorney

Company: Balch & Bingham, LLP

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

Telephone number: 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.

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 and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. 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, 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.



ERIC T. RAY

t: (205) 226-3457

f: (205) 488-5845 e: eray@balch.com

October 8, 2015

VIA FEDEX

Walter Energy Claims Processing c/o KCC 2335 Alaska Avenue El Segundo, CA 90245

Re:

Walter Energy, Inc. Claims

Dear Sir or Madam:

Enclosed for processing are the following claims on behalf of creditor Alabama Power Company:

Amount \$83,656.08 \$23,574.76 \$718.93 \$33,193.76 \$380,146.49 \$8,463.14 \$2,337,110.74 \$139,347.84	Debtor Taft Coal Sales & Associates, Inc. Taft Coal Sales & Associates, Inc. Tuscaloosa Resources, Inc. Walter Minerals, Inc. Walter Coke, Inc. Blue Creek Energy, Inc. Jim Walter Resources, Inc. Walter Black Warrior Basin, LLC	Case No. 15-02751 15-02751 15-02753 15-02763 15-02744 15-02752 15-02743 15-02756	
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Please process the enclosed claims and contact me if you have any questions about this matter.

With best regards I remain,

Sincerely yours,

Eric T. Ray

ETR:kh

Enclosures



Customer Name WALTER MINERALS INC **Account Number** 16680-12049

Due Upon Receipt Delinquent After

Aug 22, 2015

Total Due

\$ 33077.47

Service Address 1 DRUMMOND HAUL RD RIVER LOAD OUT

Final Bill

This is your final bill.

Billing Summary

Current Electric Service

Service Period June 22, 2015 - July 15, 2015

Contact Us 24 hours a day, 7 days a week AlabamaPower.com

Account Number

Web Access Code

16680-12049

626833

Customer Service

Power Outage Reporting

1-888-430-5787

1-800-888-2726

+33,077.47

Balances unpaid after 08/22/15 are subject to a late charge of 1.5% of the amount due or \$2.00, whichever is greater.

Payment Options

Online Just visit Alabamal ower.com/mypayment Login to your account using the following: Account number: 16680-12049 Web access code: 626833

By Mail

Alabama Power Payments PO Box 242 Birmingham, AL 35292

Local Office The Alabama Power local office for your service address is: 915 Queen City Avenue Tuscaloosa, AL 35401

For current billing details, turn page over 📳 🔻 🦠

PLEASE KEEP THIS PORTION FOR YOUR RECORDS.

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT, MAKING SURE THE RETURN ADDRESS SHOWS IN THE ENVELOPE WINDOW.

Account Number 16680-12049

A SOUTHERN COMPANY

915 Queen City Avenue Tuscaloosa, Al. 35401

Final Bill

Due Upon Receipt Delinquent After

Aug 22, 2015

Total Due

Correct phone number and email? Details on back.

Mail To: PO BOX 242 BIRMINGHAM AL 35292

WALTER MINERALS INC 15-02741 **DIVISION ACCOUNTING** PO BOX 1070 TUSCALOOSA AL 35403



Customer Name
WALTER MINERALS INC

Meter Reading

Account Number 16680-12049 Due Upon Receipt Delinquent After

Aug 22, 2015

Total Due

\$ 33077.47

Current Electric Service - LPM - Light and Power Medium (Primary)

Jun 22 - Jul 15 3056126		Reading Type Tot kWh	Current 25661	- Previous 25199	X	Constant 600 600	= Usage 277,200 870 0.886
		Pk kW Power Factor	1.45 0.886				
June 22, 2015	- July 15, 2	015					
Current Service	9					\$	31,831.61
Alabama Gross Receipts Tax				1,245,86			

Total Current Electric Service \$33,077.47

This is a prorated bill.

Convenient Payment Programs

Paperless Billing Pay your electric bill with a mouse click. It's quick, easy, and convenient. To sign up, call 1-800-245-2244 or visit alabamapower.com/paperless

Auto Pay Save time and effort. Auto pay is a free bill payment option—you can authorize your bill amount to be automatically debited from your checking or savings account. To sign up, call 1-800-245-2244 or visit alabamapower.com/autopay

Consumer Check Conversion - When you pay your bill by check, you authorize us to make a one-time electronic debit from your banking account.

Rate schedule available upon request.

Do we have your correct primary phone number and email?

Why? When you call to report a power outage, our automated systems identify your address by your phone number. We may occasionally want to contact you via email with important information

If your phone number or email address has changed, please update our records in the box below and mark the box on the front of the stub if you have entered a correction.

Primary Phone Number on file: 205-745-2667 at 1 DRUMMOND HAUL RD

Email Address



Customer Name WALTER MINERALS INC **Account Number** 11378-12000

Due Upon Receipt Delinquent After

Aug 22, 2015

Total Due

Service Address 8330 COUNTY ROAD 270 RR LOAD OUT AREA

Service Period June 19, 2015 - July 15, 2015

Final Bill

This is your final bill.

Payments Since Last Billing

Payment Received

No Payment Received

-0.00

Billing Summary

Current Electric Service

+116.29

Balances unpaid after 08/22/15 are subject to a late charge of 1.5% of the amount due or \$2.00, whichever is greater.

Contact Us 24 hours a day, 7 days a week

AlabamaPower.com

Account Number

Web Access Code

11378-12000

626833

Customer Service

Power Outage Reporting

1-888-430-5787 1-800-888-2726

Payment Options

Online Just visit AlabamaPower.com/mypayment Login to your account using the following: Account number: 11378-12000

Web access code: 626833

By Mail

Alabama Power Payments PO Box 242 Birmingham, AL 35292

Local Office The Alabama Power local office for your service address is: 180 Highway 304

Calera, AL 35040

For current billing details, turn page over

PLEASE KEEP THIS PORTION FOR YOUR RECORDS.

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT, MAKING SURE THE RETURN ADDRESS SHOWS IN THE ENVELOPE WINDOW.

180 Highway 304

Calera, AL 35040

Final Bill

Account Number 11378-12000

Due Upon Receipt Delinquent After

Aug 22, 2015

Total Due

Correct phone number and email? Details on back.

Mail To: PO BOX 242 **BIRMINGHAM AL** 35292

WALTER MINERALS INC 15-02741 3049 MASSEY RD VESTAVIA AL 35216

A SOUTHERN COMPANY



Customer Name
WALTER MINERALS INC

Account Number 11378-12000 Due Upon Receipt Delinquent After

Aug 22, 2015

Total Due

\$ 116.29

Current Electric Service - LPM - Light and Power Medium (Secondary)

		Meter Reading				•		
Service Period Jun 19 - Jul 15	Meter # 3027273	Reading Type Tot kWh Pk kW	Current 772 0.006	-	Previous 768	x	Constant 80 80	= Usage 320 0.48
Billing Period June 19, 2015	- July 15, 2	015						
Current Service	9							\$ 111.91
Alabama Gross	s Receipts 1	ax						4.38

Total Current Electric Service \$ 116.29

Convenient Payment Programs

Paperless Billing Pay your electric bill with a mouse click. It's quick, easy, and convenient. To sign up, call 1-800-245-2244 or visit alabamapower.com/paperless

Auto Pay Save time and effort. Auto pay is a free bill payment option—you can authorize your bill amount to be automatically debited from your checking or savings account. To sign up, call 1-800-245-2244 or visit alabamapower.com/autopay

Consumer Check Conversion - When you pay your bill by check, you authorize us to make a one-time electronic debit from your banking account.

Rate schedule available upon request.

Do we have your correct primary phone number and email?

Why? When you call to report a power outage, our automated systems identify your address by your phone number. We may occasionally want to contact you via email with important information.

If your phone number or email address has changed, please update our records in the box below and mark the box on the front of the stub if you have entered a correction.

Primary Phone Number on file: 205-808-7994 at 8330 COUNTY ROAD 270

Email Address