Fill in this information to identify the case:

Debtor 1 Superior Energy Services, Inc.

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: Southern District of Texas

Case number 20-35812

Southern District of Texas
FILED
DEC 29 2020
David J. Bradley, Clerk of Court

Official Form 410

Proof of Claim

12/15

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. **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. That date is on the notice of bankruptcy (Form 309) **that you received.**

Part 1: Identify the Claim

1. **Who is the current creditor?**
   Allied Electronics, Inc.
   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?**
   Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent?** (if different)
Allied Electronics, Inc.	_____
Name	Name
7151 Jack Newell Blvd S	_____
Number Street	Number Street
Fort Worth TX 76118	_____
City State ZIP Code	City State ZIP Code
Contact phone 817 595 8560	Contact phone _____
Contact email sarah.hargrove@alliedelec.com	Contact email _____

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

_ _

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? _____

2035812201229000000000010

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: ____ ____ ____ ____

7. **How much is the claim?** $ 223.02 . **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.
   Goods sold

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 amounts 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: _____

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

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

☑ No

☐ Yes. *Check one:*

	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 $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).	$_____
☐ Wages, salaries, or commissions (up to $12,475*) 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 4/01/16 and every 3 years after that for cases begun on or after the date of adjustment.

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 acknowledgment 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 a 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 12/21/2020
MM / DD / YYYY

Sarah Hargrove
Signature

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

Name: Sarah (First name) Julianne (Middle name) Hargrove (Last name)

Title: Credit Risk Analyst

Company: Allied Electronics, Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: 7151 Jack Newell Blvd S
Number Street

Fort Worth (City) TX (State) 76118 (ZIP Code)

Contact phone: 817 595 8560 Email: sarah.hargrove@alliedelec.com

Allied Electronics Inc.
7151 Jack Newell Blvd S
Fort Worth, TX 76118
Tel 817.595.3500
Fax 817.595.6464
www.alliedelec.com

ALLIED
ELECTRONICS & AUTOMATION

Invoice

Bill-To-Party 10103220
SUPERIOR ENERGY SERVICES, LLC
203 COMMISSION BLVD
LAFAYETTE LA 70508-3516

Ship-To-Party 1XSHIPTOUS
SUPERIOR ENERGY SERVICES, LLC
DENNIS DACOSTA
16610 ALDINE WESTFIELD RD
BLDG. E
HOUSTON TX 77032-1352

Information

Invoice No.	9012869215	Customer No.	10103220
Invoice Date	06/23/2020	Customer Contact	1X US CONTACT
Delivery No.	8011825886	Accounting Clerk Name	Hailey Chalambaga
Ref Sales Order No.	2103073355	Accounting Clerk Number	(817) 595-6469
Ordered Date	06/23/2020	Accounting Clerk Email:	ArInquiry@Alliedelec.com
Customer PO No.	31107336	Shipped Via (Date)	UPS Next Day (06/23/2020)
		Term of Payment	Net due in 30 days

ITEM	MFR. PART #	UNIT	QTY ORDERED	QTY SHIPPED	UNIT PRICE	EXTENSION
10	460	EA	2	2	97.51	195.02
	Material #:	70405868	Manufacturer:	LITTELFUSE, INC.		
	Description:	3-Phase Voltage Monitor 190-480V/AD				

Remit-To
Allied Electronics & Automation
Dallas Lockbox
P.O.Box 841811
Dallas, TX 75284-1811

Fed ID# 75-2110357
DUNS# 61-473-3525
GSA# GS-06F-0029T
Invoice# 9012869215

Products:	195.02
Freight:	28.00
Sub-Total:	223.02
Tax:	0.00
Amount Due(USD)	223.02

US

Terms and conditions may be found at www.alliedelec.com.

Partial payments are required when shipments are made against your purchase order.
PRIOR AUTHORIZATION IS REQUIRED BEFORE RETURNING MERCHANDISE.
TAXES ARE COMPUTED, WHERE APPLICABLE, ACCORDING TO FEDERAL, STATE AND LOCAL LAWS.

We hereby certify that these goods were produced in compliance with all applicable requirements of Section 6.7, and 12 of the Fair Labor Stds. Act as amended and of regulations and orders of the U.S. Dept. of Labor issued under Section 14 thereof. Allied is only acting as a distributor of products manufactured by other companies. Thus, Allied expressly limits its guarantees and warranties for products sold hereunder to those extended and allowed by the manufacturing company to be passed through to Allied's customers. There are no express or implied warranties which extend beyond the description on the face hereof. Allied disclaims and excludes from any sale of products herein, any implied warranties or merchantability, or of fitness or suitability for any particular purpose or use. All goods sold by Allied are purchased by the buyer "AS IS." Since Allied cannot control the manner or use of its products after their sale, Allied will not be responsible for any direct, consequential or indirect damages to the purchaser or any third party or ultimate user of the products. Allied will, at its option, either replace the goods sold or refund the purchase price should a product defect be brought to its attention within a reasonable time after sale.