# LOUISIANA PUBLIC SERVICE COMMISSION 7\_ 372/8 PO Box 91154: Boton Bourse LA 70001

#### PO Box 91154; Baton Rouge, LA 70821 (888) 342-5717 or (225) 342-4439

# WASTE BY MOTOR VEHICLE APPLICATION

Applicant desires to secure from the Louisiana Public Service Commission a Common Carrier Complex and Fight applicant to operate as a COMMON CARRIER OF WASTE BY MOTOR VEHICLE.

NEw       Jeria       LA       70560         Mailing Address:       100 G [en borongh Or, Ste 408       State:       ZIP Code:         City:       Honskon       7X       77067         Telephone # (Include Area Code)       Fax # (Include Area Code)       Cell # (Include Area Code)       985 - 855 - 4048         Email Address:       FEIN #: 477 - 175/229 or       SS#         COMPANY TAX REPORTING YEAR (Check ONLY one box)         Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.         Company's Tax reporting year is on a FISCAL basis reporting from to       Month/Day       Month/Day         COMPANY OWNERSHIP AND/OR INTEREST         Louisiana Domestic Corporation       Date of Incorporation		<b>BUSINESS ENTITY- APPLICANT INFORM</b>	MATION MAY 2 9 2024
If $OPhy$ If welking Sorvices, 244         DBA: (Including any doing business as "dba" name)         Business Address: IG // W. Hwy 90         City: Mew Iberia         IG // W. Hwy 90         City: Mew Iberia         IG // W. Hwy 90         City: Mew Iberia         Image: State: State: Mailing Address: Mex Iberia         Image: State: Mex Image: Stat		SECTION 1	FISCAL
DBA: (Including any doing business as "dba" name)         Business Address: (IG // W. Hwy 90)         City: (IC:ty: (IG // W. Jberia)         Mew Iberia         Mailing Address: (IO) G (en borong h Or, Ste 408)         City: (Include Area Code)         Basiness Address: (IO) G (en borong h Or, Ste 408)         City: (Include Area Code)         Basiness Address: (Include Area Code)         Basiness Address:         Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.         Company's Tax reporting year is on a FISCAL basis reporting from	Business	Entity Name: Trophy Tructuing Ser	wices, 22C
Distiness Address:       Ibrian 400         City:       Ibrian 400         Mailing Address:       IOO G (en borongh Dr., Ste 408         City:       Ibrian 400         Hons Kon       TX         Telephone # (Include Area Code)       Fax # (Include Area Code)         G32 - 982 - 6004       Fax # (Include Area Code)         Email Address:       Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Louisiana Domestic Corporation       Date of Incorporation donth/Day         Louisiana Domestic Corporation       Date of Formation </th <th></th> <th>'</th> <th>•</th>		'	•
Distiness Address:       Ibrian 400         City:       Ibrian 400         Mailing Address:       IOO G (en borongh Dr., Ste 408         City:       Ibrian 400         Hons Kon       TX         Telephone # (Include Area Code)       Fax # (Include Area Code)         G32 - 982 - 6004       Fax # (Include Area Code)         Email Address:       Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Company's Tax reporting year is on a FISCAL basis reporting from donth/Day       to donth/Day         Louisiana Domestic Corporation       Date of Incorporation donth/Day         Louisiana Domestic Corporation       Date of Formation </th <th>Business Er</th> <td>ntity's Authorized Representative: Landon Var Sou</td> <td>-ors 4</td>	Business Er	ntity's Authorized Representative: Landon Var Sou	-ors 4
City:       New Iberia       State:       ZIP Code:         Mailing Address:       100 G [e_n borong h 0r , Ste 408       TX       ZIP Code:         City:       Hous ho       TX       ZIP Code:         Hous ho       TX       ZIP Code:       ZIP Code:         Bailing Address:       TX       ZIP Code:       ZIP Code:         Telephone # (Include Area Code)       Fax # (Include Area Code)       Cell # (Include Area Code)       985 - 855 - 4048         Email Address:       Email Address:       COMPANY TAX REPORTING YEAR (Check ONLY one box)       Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.         Company's Tax reporting year is on a FISCAL basis reporting from to	161		
Mailing Address: 100 G len borong h Dr, Ste 408 City: Hons Ion Telephone # (Include Area Code) 832 - 982 - 6004 Email Address: FEIN #: 47-175/229 OR COMPANY TAX REPORTING YEAR (Check ONLY one box) Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year. Company's Tax reporting year is on a FISCAL basis reporting from to each year. COMPANY OWNERSHIP AND/OR INTEREST Louisiana Domestic Corporation Date of Incorporation Louisiana Domestic Limited Liability Company (LLC) Date of Formation Louisiana Domestic Partnership Date of Formation	<u>/////////////////////////////////////</u>	W Iberia CA	ZIP Code: 70560
City:       State:       ZIP Code:         Hous Kon       TX       77067         Telephone # (Include Area Code)       Fax # (Include Area Code)       Cell # (Include Area Code)         \$\u03c832 - 982 - 6004       Fax # (Include Area Code)       \$\u03c885 - 855 - 4048         Email Address:       \$\u03c87 - 855 - 4048       \$\u03c885 - 855 - 4048         FEIN #:       \$\u03c87 - 175/229 \u03c8 R       \$S\$#         COMPANY TAX REPORTING YEAR (Check ONLY one box)       \$\u03c8 Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.         Company's Tax reporting year is on a FISCAL basis reporting from	Mailing Add	iress:	
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Company's Tax reporting year is on a FISCAL basis reporting from to	TT .		•
Month/Day       Month/Day         Month/Day         COMPANY OWNERSHIP AND/OR INTEREST         Louisiana Domestic Corporation         Date of Incorporation         Company (LLC)         Date of Formation         Date of Formation			cember 31 each year.
Check       Louisiana Domestic Corporation       Date of Incorporation         one       Louisiana Domestic Limited Liability Company (LLC)       Date of Formation	Comp	any's Tax reporting year is on a FISCAL basis reporting from	toeach year.
Check       Louisiana Domestic Limited Liability Company (LLC)       Date of Formation         one       Louisiana Domestic Partnership       Date of Formation		COMPANY OWNERSHIP AND/OR INTERES	ST
one Louisiana Domestic Partnership Date of Formation		Louisiana Domestic Corporation	Date of Incorporation
Louisiana Domestic Partnership Date of Formation		Louisiana Domestic Limited Liability Company (LLC)	Date of Formation
		Louisiana Domestic Partnership	Date of Formation
Louisiana Limited Liability Partnership Date of Formation	DUA	Louisiana Limited Liability Partnership	Date of Formation
Foreign* Corporation in the State of Date of Incorporation		Foreign* Corporation in the State of	
$\sqrt{128/17}$ Foreign* Limited Liability Company (LLC) in the State of $\sqrt{10}$ Date of Formation $3/28/17$		Foreign* Limited Liability Company (LLC) in the State of	Date of Formation 3/28/17
Foreign* Partnership in the State of Date of Formation		Foreign* Partnership in the State of	Date of Formation
	MUST attack	a conjes of the company's Secretary of State Certificate & Articles of Incorner	ation or Formation from your state of
	MUST attack	1 copies of the company's Secretary of State Certificate & Articles of Incorpor	ation or Formation from your state of

MUST attach copies of the company's Secretary of State Certificate & Articles of Incorporation or Formation from your state of origin or existence. \*Foreign Entities must also register with the Louisiana Secretary of State's Office (La. SOS); submit copies of the paperwork filed with the La. SOS along with a copy of the Certificate of Good Standing issued by the La. SOS.

BUSINESS ENTITY- APPLICANT INFORMATION SECTION 1 (Continued)						
List Names of Officers and/or Members and percent	age of ownership or number of shares below and check one b	ox to indicate title.				
Name	<b>Title</b> (Corporations list President, Vice President, Secretary, Treasurer and LLC companies list Members)	Ownership percentage of ownership or number of shares				
Pylen Bransom	Presiden t	51%				
Landon Yerborous L	CAO	19.5%				
Craig Stafford	C00	19.5%				
Todd Cook	VP of Operation	10%				

#### **REPRESENTATION OF APPLICANT SECTION 2**

If Applicant is represented by legal counsel or if this application is being filed by legal counsel please provide the following:

LEGAL COUNSEL'S NAME:			· • • • • •	
FIRM NAME:				
Mailing Address:			<u></u>	
City:		State:		ZIP Code:
Telephone # (Include Area Code)	Fax # (Include Area Code)	<u> </u>	Cell # (Incl	ude Area Code)
Email Address:	<u> </u>			

# AUTHORITY TYPE SECTION 3

(Please check all types of waste you desire to acquire in this application below)

Non-hazardous oilfield wastes (i.e. Exploration & Production wastes as defined by RS 45:162) Non-hazardous industrial solid waste (as defined by RS 45:162) Hazardous waste (as defined by RS 45:162)

## **GEOGRAPHICAL LOCATION**

**SECTION 4** 

## Mark this box if you are seeking authority STATEWIDE

OR applicant desires to transport waste as outlined in Section 3 originating in the following parishes:

Acadia	Allen	Ascension	Assumption
Avoyelles	Beauregard	Bienville	Bossier
Caddo	Calcasieu	Caldwell	Cameron
Catahoula	Claiborne	Concordia	DeSoto
East Baton Rouge	East Carroll	East Feliciana	Evangeline
Franklin	Grant	Iberia	Iberville
Jackson	Jefferson	Jefferson Davis	Lafayette
Lafourche	LaSalle	Lincoln	Livingston
Madison	Morehouse	Natchitoches	Orleans
Ouachita	Plaquemines	Pointe Coupee	Rapides
Red River	Richland	Sabine	St. Bernard
St. Charles	St. Helena	St. James	St. John the Baptist
St. Landry	St. Martin	St. Mary	St. Tammany
Tangipahoa	Tensas	Terrebonne	Union
Vermilion	Vernon	Washington	Webster
West Baton Rouge	West Carroll	West Feliciana	Winn

### EQUIPMENT

**SECTION 5** 

	Applicant proposes to commence operations with the following equipment: (If additional space is needed, attach a separate sheet listing each vehicle)							
Year (Ex. 2016)								
	See attached							

#### TERMINALS AND SERVICE OF PROCESS SECTION 6

Please check one	Â.	y day	र १३३४३ १३४२ १३३४३ २४ २४			
Applicant is located outside of Louisiana and understands if authority is granted a LOUISIANA TERMINAL in which operations shall commence, must be established prior to issuance of the certificate.						
Applicant proposes to commence operations in listed below: (If applicant has additional Louisiana		-		(S) as		
LOUISIANA TERMINAL/LOCATION address: 16/1 W · $16$ V						
City: Wew Iberia	State: LA	ZIP Code:	560			

LPSC-T-79 (Waste) Revised 01/2018

r	TERMINALS AND SERVICE OF PROCESS     SECTION 6 (Continued)
	OUT OF STATE CARRIERS MUST LIST AGENT FOR SERVICE OF PROCESS BELOW Any carrier domiciled outside of Louisiana and providing the intrastate transportation of waste for disposal in Louisiana shall register the company's name, address and telephone number with the Louisiana secretary of state and the Louisiana Public Service Commission. Service of process with respect to all civil, criminal, or administrative proceedings brought before any court or administrative agency located in the state may be served on the registered agent as filed with the Louisiana secretary of state by any
	means provided by the applicable rules or procedure for that court or agency providing service of process.         Agent For Service Of Process Name         Agent
	Mailing Address: 16/1 W. Huy 90
	City: New Iberia IA ZIP Code: 70560
	VERIFICATION SECTION 7
	STATE OF TELAS PARISH/COUNTY OF HAPP'S COUNTY
	STATE OF <u>Tereas</u> PARISH/COUNTY OF <u>Harris County</u> BEFORE ME, the undersigned authority, <u>Fred</u> Owens-Kandon Tarborough
	(Applicant) who represents <u>Trophy</u> <u>Trucking</u> <u>Services</u> <u>L</u> <u>L</u> <u>C</u> (Business Entity) personally came and appeared, who, after being duly sworn, did depose and say that he/she is the APPLICANT in the above application; that he/she desires to secure from the Louisiana Public Service Commission a Common Carrier Certificate, authorizing the applicant to operate as a carrier of <b>Waste</b> as stated; and that he/she has read same and is familiar with the contents thereof and that facts as stated therein are true and correct, and to the best of his/her knowledge. FURTHERMORE, APPLICANT agrees to comply with all provisions of law and the rules and regulations of the Louisiana Public Service Commission respecting the operation of public service motor vehicles, and to file with the Commission a tariff which shows the services to be rendered and the basis for computation of rates, schedules and other required data; and to file such evidence of insurance or bonds as required by law and by the rules and regulations of the Louisiana Public Service Commission prior to commencement of operations. And understands that the information contained in this application may be shared with the Louisiana Public State of Texas Comm. Expires 03-01-2028 Notary Public, State of Texas Comm. Expires 03-01-2028 Notary Public, State of Texas
	SWORN TO AND SUBSCRIBED before me this 22 day of MAY, 2020
	PRINTED NAME OF APPLICANT LESLY BOUSSARD PRINTED NAME OF APPLICANT PRINTED NAME OF NOTARY PUBLIC
	SIGNATURE OF APPLICANT SIGNATURE OF NOTARY PUBLIC (including Notary Seal & Number)
	LPSC_OFFICE USE ONLY
	Accepted by Staff Date 6-3-24
	DOCKET # $T - 3728$ PUBLISHED IN BULLETIN # $1325 \cdot 01  6 - 7 - 24$

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LPSC-T-79 (Waste) Revised 01/2018

	40 Tractors			
		Year	Make	Model
	4V4NC9EH5HN974303	2017	VOLVO	i
3833	1GT49SEY5PF206486	2023	GMC	·
40004	3C63RRJL4NG279107	. 2022	DODGE	RAM
**************************************	1FUJA6CK3LW09830		FREIGHTLINER	COLUMBIA
40007	1FUJGEDVXDBU6155	2013	FREIGHTLINER	CASCADIA
40009	1M1AW07W1DM028448		MACK	Π
40010	1GC4KXEY2KF133216	2019	CHEVY	3500HD
40011	1XKYDP9X1JJ192027	2018	KENWORTH	-
40013	1XKWDB9X1VJ753228	1997	Kenworth	W-900
40015	3C63RRJL9LG177430	2020	RAM	· · · · · · · · · · · · · · · · · · ·
40017	1XKAD48X1EJ386340	2014	KENWORTH	-
40019	1XPHD49X3CD152025	2012	PETERBILT	-
40022	1FUJF6CK65DU28246	2005	FREIGHTLINER	- 335
40023	1XKAD49X2CJ327132	2012	KENWORTH	••••••••••••••••••••••••••••••••••••••
40024	1XKAD49X6DR349914	2013	KENWORTH	
40027	1XKYD49X1HJ16674	2017	KENWORTH	-
40028	4V4NC9EJ4GN961978	2016	VOLVO	
40032	4V4BC9EH9FN184791	2015	VOLVO ····	-
40033	5KJJABCK05PN90969	2005	Western Star	-22 - Constant
40037	1XPXD49X9KD613853	2019	PETERBILT	-
40041	3HSDJAPR2FN513590	2015	INTERNATIONAL	-
40042	1XPXD49X5FD255821	2015	Peterbilt	Π
40043	3WKDP4TX0GF490286	2016	KENWORTH	<u>- ( 1997)</u>
40044	1FUPCDZB3YLA63018	2000	FRHT	-

Termina	l 40 Trailers			
Unit	VIN	Make	Model	Year
40004A	4P5FD4023H1264199	20:	[7] PJ	FD4
40004B	16V3F4828N6191409	202	22 BIGT	FB
40005A	4WWBGB6B1XM602299	199	99 WILSON TRL	FB S
40007A	1JJF48270RI-214271	199	94 WABASH	FB
40009A	1TTF48205V1052899	/ 199	7 TRAI	FB
40009A	1TTF48205V1052899		7 TRAI GN	FB
40010A	5RVGN4028BM007983	20:	l1 Lama	tru
40011A	1XKYDP9X1JJ192027	200	9 GDAN	<b>,F</b> B <sup>*</sup> , ;;; ;
40013A	1RHF48A294R009789	200	04 REITNOUR	TRĽ
40014A	4ZEGH4021J1162193		L8, LDTR	-
40015A	5RVGN4029DM014654	20	I3 LAMA	FB
40017A	13N14820291549366	200	9 FONT	FB
40019A	1TTF48208S1048714	199	95 TRAN	Constant
40022A	1D9BG4841208825	<u>`</u> 20:	14 DOON	~
40023A	17924152XC1258517	20:	12 OVEL	3

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40024A 1Z9VC3820AM310210	2010 ITI	
40026A 1T9TA432X71867080	2007 TROXELL	-
40027A 13N1480761535134	2006 FONTAINE	
40028A 1D9BG5322M1609439	2021 DOON	
40032A 1UNST42255L037409	2005 DRAGON	
40033A 1P9TA4324U1260731	1997 PION	TN
40037A 1V9DR532XKN062366	2019 VIKI	
40037B 13N1532C9N1548249	2022 FONT	HAR
40039A HPTR16107	2007 SHOP	
40041a 1G9VT4020DH018775	2013 GALY	
40042A 3A9L6KZ22RP290136	2024 ILT	DD
40043A 1N9DD532XKH175327	2019 NEVL	
40044A 1UNST422X4L029028	2004 DRAGON	

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Termin	al 26 Tractors			
Unit	VIN	Year	Make	Model
1296	1NPXGGGG90D408813	2016	Peterbilt	
1467	1FUYDXYB5RH738812	1994	Freightliner	USF-1E
2614	1GB3CZCG3CF128143	2012	Chevrolet	Silverado
2619	3AKJGNDRXJDJY5410	2018	Freightliner	SD122
2623	1GC4YTEY6PF236198	2023	Chevrolet	Silverado HD
2626	1XPHD49X0CD148272	2012	Peterbilt	386
1479	1XP5DB9XX5D869967	2005	Peterbilt	
2630	1XPWD49X2CD147647	2012	Peterbilt	388
2632	2HSCKSCR25C008069	2005	International	9900ix
2634	1FUJBBCG61PF42758	2001	See Freightliner	CST120
2635	1XP5DB9XX5D852683	2005	Peterbilt	379
2636	2HSCEAMRX1C016432	2001	International	9200i
2637	1XP7D49X89D784426	2009	Peterbilt	387

Termina	ll 26 Trailers			
Unit	VIN	Make	Model	Year
2619A	13N253201N1548854	FONA		2022
2626A	1UYFS248XA823245	UTILITY	FB	1999
1479A	1GRDM9629FH727883	GDAN	TRL	2015
2630A	1TTF4820212007875	TRANSCRAFT	SUPER EAGLE	2001
2631A	16V3F4825P6236986	BIGT		2023
2634A.	1UYF52480J5371701	UTILITY	FSACHA	2018
2635A	13N248208K1531660	DORS	FB	0
2635B	5JYEF4827DE085110	DOR	FB	2013
2636A	13N148306W1578511	FONT	UT	1998
2637A	1TTF48206Y1063706	TCTF	FB	2000

Trophy Trucking Personnel

Fred Owens VP of HSE 985-855-4048 fred@trophytrucking.com

Ryan Rachel, La. Regional Mgr. 601-807-4609 <u>rrachel@trophytrucking.com</u> Curry Compeaux, Terminal Mgr. New Iberia, LA 985-258-5645 <u>ccompeaux@trophytrucking.com</u> Landon Yarborough CFO 985-687-1304 <u>landon@trophytrucking.com</u> Greg Broussard La. Safety Mgr. 337-250-1271 <u>gbroussard@trophytrucking.com</u>



**TROPHY TRUCKING SERVICES, LLC** 

A limited liability company domiciled in HOUSTON, TEXAS,

Filed charter and qualified to do business in this State on December 17, 2021,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

April 29, 2024

Jancy Jandry Secretary of State

Web 44714950G



Certificate ID: 11877325#3PK73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed. www.sos.la.gov



the Application Form for Certificate of Authority of

#### **TROPHY TRUCKING SERVICES, LLC**

Domiciled at HOUSTON, TEXAS,

Was filed and recorded in this Office on December 17, 2021.

Thus authorizing the limited liability company to exercise the same rights and privileges accorded similar domestic limited liability companies, subject to the provisions of R. S. Title 12, Chapter 22, Part VIII.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

December 17, 2021

/2 T Z / 18 L Secretary of State

WEB 447149500



Certificate ID: 11499190#6DS93

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed. www.sos.la.gov

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



# Office of the Secretary of State

August 01, 2014

Attn: Nicole D Gonzales

Sharpe & Associates, PLLC 4925 Greenville Avenue, Suite 425 Dallas, TX 75206 USA

RE: Trophy Trucking Services, LLC File Number: 802037552

It has been our pleasure to file the certificate of formation and issue the enclosed certificate of filing evidencing the existence of the newly created domestic limited liability company (llc).

Unless exempted, the entity formed is subject to state tax laws, including franchise tax laws. Shortly, the Comptroller of Public Accounts will be contacting the entity at its registered office for information that will assist the Comptroller in setting up the franchise tax account for the entity. Information about franchise tax, and contact information for the Comptroller's office, is available on their web site at <u>http://window.state.tx.us/taxinfo/franchise/index.html</u>.

The entity formed does not file annual reports with the Secretary of State. Documents will be filed with the Secretary of State if the entity needs to amend one of the provisions in its certificate of formation. It is important for the entity to continuously maintain a registered agent and office in Texas. Failure to maintain an agent or office or file a change to the information in Texas may result in the involuntary termination of the entity.

If we can be of further service at any time, please let us know.

Sincerely,

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Corporations Section Business & Public Filings Division (512) 463-5555

Enclosure

Corporations Section FO.Box 13697 Austin, Texas 78711-3697



Nandita Berry Secretary of State

# Office of the Secretary of State

# CERTIFICATE OF FILING OF

Trophy Trucking Services, LLC File Number: 802037552

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Formation for the above named Domestic Limited Liability Company (LLC) has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

The issuance of this certificate does not authorize the use of a name in this state in violation of the rights of another under the federal Trademark Act of 1946, the Texas trademark law, the Assumed Business or Professional Name Act, or the common law.

Dated: 07/31/2014

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Effective: 07/31/2014



NANDITA BERRY

Nandita Berry Secretary of State

Jul. 31. 2014 3:58PM

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No, 4089 P. 5

FILED In the Office of the Secretary of State of Texas

JUL 3 1 2014

#### CERTIFICATE OF FORMATION OF TROPHY TRUCKING SERVICES, LLC A LIMITED LIABILITY COMPANY

**Corporations Section** 

. This certificate of formation is submitted for filing pursuant to the applicable provisions of the Texas Business Organizations Code.

#### Article I - Entity Name and Type

The name and type of filing entity being formed is Trophy Trucking Services, LLC, a Texas limited liability company (hereinafter "Company").

#### Article II - Purpose

The purpose for which the Company is organized is any lawful purpose which may be undertaken by the company in accordance with the applicable provisions of the Texas Business Organizations Code.

#### Article III - Registered Office and Registered Agent

The initial registered agent is an individual resident of this State by the name of Dylan Wayne Bransom. The business address of the initial registered agent and the initial registered office is 240 E. Renfro, Suite 203, Burleson, Texas 76028.

#### Article IV - Organizer

The name and address of the organizer is:

<u>Name</u>

Sharpe & Associates, PLLC

<u>Address</u>

4925 Greenville Avenue Sulte 425 Dallas, Texas 75206

#### Article V - Governing Authority

The company shall be managed by its Managers. The name and address of each individual to serve as Manager is:

#### <u>Name</u>

Dylan Wayne Bransom

2

Gray Leigh-Adella Bransom

#### <u>Address</u>

240 E. Renfro, Suite 203 Burleson, Texas 76028

240 E. Renfro, Suite 203 Burleson, Texas 76028

#### Article VI - Effective Date of Filing

This certificate of formation becomes effective when the document is filed by the secretary of state.

Docket No.: <u>7-37218</u>

# LOUISIANA PUBLIC SERVICE COMMISSION

Exhibit Financial doc's

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Confidential sealed documents

\_\_\_\_ Oversized document

\_\_\_\_ Non-paper exhibit

Photographs

\_\_\_\_ Other:

Please contact the Records Division of the Louisiana Public Service Commission at (225) 342-3157 for more information about this item.



DATE (MM/DD/YYYY) 5/22/2024

#### CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED

R	REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.										
lf	SU	RTANT: If the certificate holder BROGATION IS WAIVED, subject ertificate does not confer rights to	ct to	the	terms and conditions of	the pol	licy, certain ( orsement(s)	policies may			
1	DUCE	R Andrus Insurance				CONTAC NAME: PHONE	CT		FAX	No):(337)	
a di	visio	n of HUB International Gulf South	h			(A/C, No	o, <sub>Ext):</sub> (337) 9	181-7300 I Customer			
		er Blvd. Ste. 110 e. LA 70503				ADDRE			Service@hubinter	national.	
					INSURER(S) AFFORDING COVERAGE					NAIC #	
<u> </u>									e Company		35602
INSU	RED						RB:Lloyds				<u> </u>
		TROPHY TRUCKING SERVIC	CES	LLC			RC:Texas I				22945
		100 Glenborough Dr #408				INSURE	RD:Atlantic	Specialty	Ins Co.		27154
Houston, TX 77067						INSURE	RE:Starr Si	urplus Line	s Ins Co.		13604
						INSURE	RF:				
<u> </u>	VER	AGES CER	TIFIC	CATE	ENUMBER:				REVISION NUMBER	R:	
IN C	IDIC/ ERTI	IS TO CERTIFY THAT THE POLICIE ATED. NOTWITHSTANDING ANY R FICATE MAY BE ISSUED OR MAY JSIONS AND CONDITIONS OF SUCH	equi Per Poli	IREMI TAIN, CIES.	ENT, TERM OR CONDITION THE INSURANCE AFFORI LIMITS SHOWN MAY HAVE	N OF A DED BY	INY CONTRAC THE POLICI REDUCED BY	CT OR OTHEF IES DESCRIB PAID CLAIMS	R Document with Re ED Herein is Subje	ESPECT TO	WHICH THIS
		TYPE OF INSURANCE	ADDL	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS	
A	X	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR	LDT-GL-000001014-00			4/14/2024	4/14/2024	4 4/14/2025	DAMAGE TO RENTED PREMISES (Ea occurrence	e) \$	100,000
									MED EXP (Any one persor		10,000
							PERSONAL & ADV INJUR		1,000,000		
	GET								GENERAL AGGREGATE	s	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:								PRODUCTS - COMP/OP A		2,000,000
	-	OTHER:	ļ							s	
A	AUT								COMBINED SINGLE LIMIT (Ea accident)		1,000,000
1	X	ANY AUTO			LDT-AL-000001013-00		4/14/2024	4/14/2025	BODILY INJURY (Per pers		
			1					BODILY IN IT IRY (Per acci			
	HIRED NON-OWNED AUTOS ONLY								PROPERTY DAMAGE (Per accident)	s	
	x	HIRED AUTOS ONLY Symbol 61 X MCS90								s	
в	X								EACH OCCURRENCE	s	4,000,000
	H			TTSL2024040433		4/14/2024		24 4/14/2025	AGGREGATE	s	4,000,000
		DED X RETENTION \$ 25,000							AGGREGATE	s	
C	WOF	RKERS COMPENSATION EMPLOYERS' LIABILITY							X PER OT	TH-	· · · ·
	AND	EMPLOYERS' LIABILITY			0002072082		4/22/2024	4/22/2025	E.L. EACH ACCIDENT	<u>s</u>	1,000,000
		PROPRIETOR/PARTNER/EXECUTIVE	N/A								1.000,000
	If ye	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLO		1,000,000
D	DES	CRIPTION OF OPERATIONS below 1-Trucking Liab		-	794-000-432-01		7/1/2023	7/1/2024	E.L. DISEASE - POLICY LI	<u>IMIT \$</u>	1.000.000
E		tor Truck Cargo			ITH11418824		5/10/2024	5/10/2025	Limit		250,000
							. I UILULT				,000
	1		<u> </u>	1	. <u> </u>			<u> </u>			
DES	CRIPI Atta	TON OF OPERATIONS / LOCATIONS / VEHIC ched Acord 101	LES (	ACOR	0 101, Additional Remarks Schedu	le, may b	e attached if mor	re space is requi	red)		
1											

CERTIFICATE HOLDER

P.O. Box 91154 Baton Rouge, LA 70821

Louisiana Public Service Commission

CANCELLATION

RI

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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ADDITIONAL REMARKS SCHEDULE

Page 1 of 3

AGENCY Dwight Andrus Insurance POLICY NUMBER		NAMED INSURED TROPHY TRUCKING SERVICES LLC 100 Glenborough Dr #408 Houston, TX 77067							
SEE PAGE 1									
CARRIER	NAIC CODE								
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1							
ADDITIONAL REMARKS									
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,									
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance									
ADDENDUM TO CERTIFICATE OF INSURANCE: Any information contained in this Addendum is general and descriptive only. The Certificate of Insurance and this Addendum may not contain descriptions of any or all operations, locations, vehicles or exclusions. Please see policy forms and endorsements for specific coverages and exclusions. Contractors Pollution Policy # CPL2040125-11 4/14/24 to 4/14/25 – Nautilus Insurance Company									
<ul> <li>Each Pollution Condition Limit - \$6,000,000</li> <li>General Aggregate Limit - \$6,000,000</li> <li>Each Pollution Condition Deductible - \$10,000</li> <li>Microbial Substance Limit (Sublimit Each Occurri Microbial Substance Aggregate Limit - \$6,000,000</li> <li>Microbial Substance Deductible \$10,000</li> <li>Transportation Pollution Liability Coverage. FOR</li> <li>Additional Insured - Blanket. FORM #CPLO4038</li> <li>Waiver of Subrogation. FORM #ENV2004 0618</li> <li>Contractors Pollution Liability, Form #CPLO4000</li> <li>Notice of Cancellation for Non-Payment of Prer</li> </ul>	0 M #CPL 4019 0 0318 0318	318							
Auto Contingent Liability Policy #216-002-819 7/1/2023 to 7/1/2024 - Homeland Insurance Compar •Covered Persons: Owner-Operators & Contract D •ITEM 4: LIMITS OF LIABILITY (inclusive of Defens (A) Workers' Compensation Reimbursement Bener (B) Employer's Liability: Injury other than by Disease: \$ 100,000 each Cover Injury by Disease: \$ 500,000 Policy Limit Injury by Disease: \$ 100,000 each Covered Person	rivers (as defin se Expenses): fit Limit: Equiva red Person per	alent to Statutory Benefits*							
obligated to include as an Additional Insured under prior to the "occurrence", but only with respect to caused, in whole or in part, by: 1. Your acts or om When required by written contract or written ag will not seek contribution from any other insuranc Additional Insured is a Named Insured under such insurance would be primary and would not seek co When required by written contract or written ag may have against any person or organization beca advertising injury" caused, in whole or in part, by:	Additional Insi er this policy, as liability for "bo issions; or 2. Th greement you er e available to an other insurance ontribution from greement entere ause of paymen	Ther of Rights; Includes: ured any person(s) or organization(s) to whom you become is a result of any written contract or written agreement you enter int dily injury", "property damage" or "personal and advertising injury the acts or omissions of those acting on your behalf; inter into prior to the "occurrence", this insurance is primary to and n Additional Insured under your policy provided that: 1.The te; 2. You have agreed in such contract or agreement that this n any other insurance available to the Additional Insured. ed into prior to the "occurrence", we waive any right of recovery we ts we make for "bodily injury", "property damage" or "personal an omissions; or 2. The acts or omissions of those acting on your							
<ul> <li>behalf</li> <li>Cancellation By Us, FORM #CG02121185</li> <li>Notice of Cancellation - 60 Days</li> <li>Notice of Cancellation for Non-Payment of Prer</li> </ul>	mium - 10 Days								
Auto Liability #LDT-AL-000001013-00 -LD 00 26_0323 - Blanket Additional Insured and W Who Is An Insured is amended to include as an	Vaiver of Transf 1 Additional Inst	er of Rights; Includes: ured any person(s) or organization(s) to whom you become							
ACORD 101 (2008/01) The ACORD n	ame and logo ar	© 2008 ACORD CORPORATION. All rights reserved. re registered marks of ACORD							

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ADDITIONAL DEMADKS SCHEDULE

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ADDITIONA		
AGENCY Dwight Andrus Insurance		NAMED INSURED TROPHY TRUCKING SERVICES LLC 100 Glenborough Dr #408 Houston TX 2707
POLICY NUMBER		Houston, TX 77067
SEE PAGE 1		
	NAIC CODE	
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1
ADDITIONAL REMARKS		
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO AC	ORD FORM,	
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liabi	lity Insurance	
<ul> <li>obligated to include as an Additional Insured under th prior to the "loss", but only with respect to your acts of a covered "auto".</li> <li>When required by written contract or written agreer seek contribution from any other insurance available to Insured is a Named Insured under such other insurance insurance would be primary and would not seek contributed by written contract or written agree have against any person or organization because of p ownership, maintenance or use of a covered "auto".</li> <li>MCS90 Endorsement For Motor Carrier Policies of In 1980</li> <li>Common Policy Conditions, FORM #IL00171198</li> <li>Notice of Cancellation - 30 Days</li> <li>Notice of Cancellation for Non-Payment of Premiur Workers Comp Policy #0002072082</li> <li>Alternate Employer Endorsement - FORM #WC00030</li> <li>- Any Special or Temporary Employer or Employees</li> <li>Texas Waiver of Our Right to Recover From Others E</li> <li>Blanket Waiver - Any person or organization for whether the there and the top of the set of</li></ul>	is policy, as or omissions nent you en- to an Additic ce; 2. You ha ibution from ment entere ayments we surance for n - 10 Days 1 covered und indorsement om the Nam GE trophe Limit	t - FORM #WC420304B ed Insured has agreed by written contract to furnish this waiver. - \$1,500,000
• Loss Payable Schedule - All Loss Payees on file with	the compar	ny and/or the agent
	•	
Livestock Motor Truck Cargo #87LST243084 8/3/2023 to 8/3/2024 - Hartford Fire Insurance Company •\$5,000 Deductible •LS 00 20 10 91 Livestock Transit Coverage Form The most we will pay for loss in any one occurrence	-	
"Current market value " means the average market v terminal or auction market as published by the United Covered Livestock, as used in this Coverage Form, slaughter, "stocker " or feeder purposes, your propert •LS 20 70 02 22 NAMED PERIL-ONLY COVERAGE RES •LS 20 62 10 21 DEATH-ONLY COVERAGE RESTRICTI One Animal - Horses, Donkeys, and Mules •LS 20 56 09 18 SPECIAL VALUE CATTLE Endorsement	alue applica States Depa means cattl y or the pro TRICTION E ON ENDORS	ble to slaughter, "stocker" or feeder Livestock at the nearest artment of Agriculture or Agriculture Canada. e, sheep, swine, goats, horses, mules and donkeys destined for perty of others in your care, custody or control. NDORSEMENT HORSES, DONKEYS, AND MULES SEMENT HORSES, DONKEYS, AND MULES - \$1,000 Limit for Any
Theft at the nearest applicable market, as published b	ittle," "Curre laughter , "S by the applic r Theft occu	ent Market Value" means the lessor of: tocker ," or feeder livestock, as determined on the date of Death or able government livestock price reporting service or other rs on a holiday , weekend , or other non-business day, the "Current



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Page 3 of 3

## ADDITIONAL REMARKS SCHEDULE

AGENCY Dwight Andrus Insurance		NAMED INSURED TROPHY TRUCKING SERVICES LLC 100 Glenborough Dr #408
POLICY NUMBER		Houston, TX 77067
SEE PAGE 1	•	
CARRIER	NAIC CODE	
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1
ADDITIONAL REMARKS		
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACC		
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liabil	lity Insurance	
<ul> <li>(2) The applicable Per Head Limit shown in the ScheduIf the Covered Livestock ARE "Special Value Cattle,"</li> <li>(1) The substantiated current per head value of such "</li> <li>Umbrella Liability Policy #TTSL2024040433</li> <li>Umbrella Policy 2002 - Including Co-Insured and Wair FORM #UM 00 00 10 06.</li> <li>Schedule of Underlying Policies - FORM #UM 00 05 0</li> <li>General Liability #LDT-GL-000001014-00</li> <li>Auto Liability #LDT-AL-000001013.00</li> <li>Employers Liability #0002072082</li> <li>Umbrella Policy Form #UM00001006</li> <li>Notice of Cancellation - 30 Days</li> <li>-Notice of Cancellation for Non-Payment of Premium</li> </ul>	"Current Ma Special Valu ver of Subro 7 07:	arket Value" means the lessor of:

CHRISTI CRADDICK, CHAIRMAN WAYNE CHRISTIAN, COMMISSIONER JIM WRIGHT, COMMISSIONER



DANNY SORRELLS ASSISTANT EXECUTIVE DIRECTOR DIRECTOR, OIL AND GAS DIVISION

# **RAILROAD COMMISSION OF TEXAS**

Environmental Permits and Support 4/8/2024

Trophy Trucking Services, LLC 100 GLENBOROUGH DRIVE STE 408 HOUSTON, Texas 77067

RE: PERMIT ISSUED Form No. 77107 for a Waste Hauler Permit Application WHP No. WH-00008741

Dear Operator:

Technical Permitting has reviewed the above-referenced application, submitted in hard copy and entered by RRC Staff on 4/8/2024. The Application is complete, and the permit is hereby administratively granted. An updated list of approved vehicles is in the attached permit.

For questions or additional information, contact Environmental Permits and Support by phone at 512-463-7371 or by email at whp@rrc.texas.gov.

Sincerely,

Christine Peters, Manager Environmental Permits and Support Technical Permitting Authority is granted by the Railroad Commission of Texas (Commission) to haul, handle, and dispose of oil and gas waste in accordance with 16 Texas Administrative Code (TAC), Part 1, Chapter §3.8 (Statewide Rule 8) and is subject to the following conditions:

A. The authority granted by this permit is effective 4/8/2024 and will expire on 05/31/2025, unless suspended or revoked for cause shown.

B. This permit authority is limited to the hauling, handling, and disposal of oil and gas waste off a lease, unit, or other oil and gas property.

C. This permit authorizes the permitted hauler to dispose of the oil and gas waste only at the following disposal/injection systems:

1. Commission-permitted disposal/injection systems.

2. Disposal systems operated under authority of a minor permit issued by the Commission.

3. Disposal systems permitted by another state agency, or another state provided the Commission has granted separate authorization for the disposal.

D. Each vehicle must be marked on both sides and in the rear with the permitted hauler's name (exactly as shown on the P-5 Organization Report) and permit number in characters not less than three inches high.

E. This permit authorizes the permitted hauler to use only those vehicles shown on the Commission-issued listing of approved vehicles which are listed on Permit Attachment A (Waste Hauler Vehicle Identification).

F. Each vehicle must carry a copy of this permit along with a copy of those parts of Permit Attachment A (Waste Hauler Vehicle Identification) that are relevant to that vehicle's activities.

G. Each vehicle must be operated and maintained in such a manner as to prevent spillage, leakage, or other escape of oil and gas waste during transportation.

H. The permitted hauler must make each vehicle available for inspection upon request by Commission personnel.

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I. The permitted hauler must compile and keep a current list of all persons by whom the permitted hauler is hired to haul and dispose of oil and gas waste and furnish such list to the Commission upon request.

J. The permitted hauler must adequately train all drivers to ensure compliance with Commission rules, including record keeping requirements, and adherence to proper emergency response and notification procedures.

K. The permitted hauler must keep a daily record of the oil and gas waste hauling operations of each approved vehicle. The daily record, signed and dated by the vehicle driver, must be kept open for Commission inspection and must be kept on file for a period of three years from the date of operation and recordation. The record must contain the following information:

1. The permitted hauler must keep a daily record of the oil and gas waste hauling operations of each approved vehicle. The daily record, signed and dated by the vehicle driver, must be kept open for Commission inspection and must be kept on file for a period of three years from the date of operation and recordation. The record must contain the following information:

- a. Operator name
- b. Lease name or facility name

c. Lease number and well number(s), or API well number(s), or permit number, or latitude and longitude coordinates in decimal degrees if waste was not generated on a lease

d. County

2. Type and volume (specify units) of oil and gas waste received by the hauler at the property where it was generated

3. Identity of the disposal system to which the oil and gas waste is delivered, including:

.

- a. Operator name
- b. Lease name or facility name

c. Lease number and well number(s), or API well number(s), or permit number, or latitude and longitude coordinates in decimal degrees if waste was not generated on a lease

d. County

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4. Type and volume (specify units) of oil and gas waste transported and delivered to the disposal system

L. The permitted hauler must file an application to renew this permit, using the assigned permit number, before the expiration date specified in this permit.

M. This permit is not transferable.

This authorization is granted subject to review and cancellation should investigation show that such authorization is being abused.

APPROVED AND ISSUED ON 4/8/2024

Sincerely,

Christine Peters, Manager Environmental Permits and Support Technical Permitting Attachments: Permit Appendix A

4, r.

Hauler Name	Perm	nit No. Permit Date			Expiration Date				
Trophy Trucking Services	00008741	04/0	04/08/2024			05/31/2025			
A COPY OF THE PART	OF THIS	LIST	ING RELEVANT TO THAT VEHICLES ACTIVITIES						
MUST BE CARRIED IN EACH VEHICLE SUBJECT TO THIS PERMIT									
Vehicle VIN	License		Make	Ν	Model	Year		Capacity	Units
	Plate#								
IUNST422XCL094766 19		4	DRAGON		VAC TRLR	2013		130	bbls
3M9H5TA25CG009277	19H5TA25CG009277 Z03134		HERC		ſN	2012		130	bbls
1G9VT4029CH018496	198B927		GAYLEAN		FANK	2012		130	bbls
•					FRLR				
1G9VT402BH018048	068C41	6	GALT		ſN	2011		130	bbls
1P9VN36284K359100	5596ST	U	PROC		ST	2004		130	bbls
1T9AC14B6FF003112	025B407		TRAI	Γ	ſŊĸ	1985		130	bbls
1UNST422XCL086831	136C22	0	DRAGON		VT	2012		130	bbls
5AGEV4226B5S663101	9546LD		VE	ר	FRLR	2011		130	bbls
			ENTERPRIS						
			E						
1W9FS42226S1W9477	241C732		DIAMOND		30	2017		130	bbls
			ARROW						
1WPFS42206S1W9123	241C874		DIAMOND		30	2017		130	bbls
			ARROW						
1UNST422XBL094362	2 244B505		DRAGON		ſRL	2011		130	bbls
1W9FS4221GS1W9567	243C485		DIAM		<b>FRL</b>	2016		130	bbls
1UNST4025BL068917	209C42	0	DRAGON		TN 2011			130	bbls
1W9FS4222HS1W9111	243C42	0	DIAM	T	ſRL	2017		130	bbls